FORM NLRB-501 (2-18)

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST EMPLOYER

DO NOT WRITE IN THIS SPACE

Case 32-CA-264660 Date Filed 8/13/2020

INSTRUCTIONS:

| a Name of Employer | OYER AGAINST WHOM CHARGE IS BROUGHT | | |
|--|---|---|--|
| a. Name of Employer FOSTER POULTRY FARMS | | b. Tel. No. 209-394-7901 | |
| | | c. Cell No. | |
| | | f. Fax. No. | |
| d. Address (Street, city, state, and ZIP code) | e. Employer Representative | g. e-mail | |
| 843 Davis Street PO Box 457 | Maria Silveira, Human Resources | maria.silveira@fosterfarms.com | |
| Livingston, CA 95334 | | h. Number of workers employed 2,700 | |
| i. Type of Establishment (factory, mine, wholesaler, etc.) Poultry Processing | j. Identify principal product or service Poultry Processing | | |
| The above-named employer has engaged in and is engage | ging in unfair labor practices within the meaning of se | ection 8(a), subsections (1) and | |
| (list subsections) 8(a)(1) and 8(a)(5) | of the National La | bor Relations Act, and thest unfair labor | |
| practices are practices affecting commerce within the mean the Act and the Postal Reorganization Act. | aning of the Act, or these unfair labor practices affect | ting commerce within the meaning of | |
| 2. Basis of the Charge (set forth a clear and concise state | ement of the facts constituting the alleged unfair labo | or practices) | |
| the Act by refusing to provide information requeste This violation amounts to bad faith bargaining in v | | | |
| This violation amounts to bad faith bargaining in v 3. Full pame of party filing charge (if labor organization, or | riolation of the Act. | | |
| This violation amounts to bad faith bargaining in v | iolation of the Act. ive full name, including local name and number) | 4b. Tel. No. | |
| This violation amounts to bad faith bargaining in v 3. Full name of party filing charge (if labor organization, gi United Farm Workers of America ("UFW") 4a. Address (Street and number, city, state, and ZIP code | iolation of the Act. ive full name, including local name and number) | 4b. Tel. No. | |
| This violation amounts to bad faith bargaining in v 3. Full name of party filing charge (if labor organization, gi United Farm Workers of America ("UFW") | iolation of the Act. ive full name, including local name and number) | | |
| This violation amounts to bad faith bargaining in v 3. Full name of party filing charge (if labor organization, gi United Farm Workers of America ("UFW") 4a. Address (Street and number, city, state, and ZIP code 29700 Woodford-Tehachapi Road P.O. Box 62 | iolation of the Act. ive full name, including local name and number) | 4b. Tel. No. | |
| This violation amounts to bad faith bargaining in v 3. Full name of party filing charge (if labor organization, gi United Farm Workers of America ("UFW") 4a. Address (Street and number, city, state, and ZIP code 29700 Woodford-Tehachapi Road P.O. Box 62 | iolation of the Act. ive full name, including local name and number) | 4b. Tel. No. 4c. Cell No. 661-972-1176 | |
| This violation amounts to bad faith bargaining in v 3. Full name of party filing charge (if labor organization, gi United Farm Workers of America ("UFW") 4a. Address (Street and number, city, state, and ZIP code 29700 Woodford-Tehachapi Road P.O. Box 62 | riolation of the Act. ive full name, including local name and number) | 4b. Tel. No. 4c. Cell No. 661-972-1176 4d. Fax No. 4e. e-mail enavarrete@ufw.org | |
| 3. Full name of party filing charge (if labor organization, grunited Farm Workers of America ("UFW") 4a. Address (Street and number, city, state, and ZIP code 29700 Woodford-Tehachapi Road P.O. Box 62 Keene, CA 93531 5. Full name of national or international labor organization United Farm Workers of America ("UFW") | ive full name, including local name and number) of which it is an affiliate or constituent unit (to be filled) ARATION ve charge and that the statements | 4b. Tel. No. 4c. Cell No. 661-972-1176 4d. Fax No. 4e. e-mail enavarrete@ufw.org | |
| 3. Full name of party filing charge (if labor organization, grunited Farm Workers of America ("UFW") 4a. Address (Street and number, city, state, and ZIP code 29700 Woodford-Tehachapi Road P.O. Box 62 Keene, CA 93531 5. Full name of national or international labor organization United Farm Workers of America ("UFW") | ive full name, including local name and number) of which it is an affiliate or constituent unit (to be fille | 4b. Tel. No. 4c. Cell No. 661-972-1176 4d. Fax No. 4e. e-mail enavarrete@ufw.org ed in when charge is filed by a labor organization) Tel. No. | |
| 3. Full name of party filing charge (if labor organization, grunited Farm Workers of America ("UFW") 4a. Address (Street and number, city, state, and ZIP code 29700 Woodford-Tehachapi Road P.O. Box 62 Keene, CA 93531 5. Full name of national or international labor organization United Farm Workers of America ("UFW") | ive full name, including local name and number) of which it is an affiliate or constituent unit (to be filled) ARATION to charge and that the statements by knowledge and belief. | 4b. Tel. No. 4c. Cell No. 661-972-1176 4d. Fax No. 4e. e-mail enavarrete@ufw.org ed in when charge is filed by a labor organization) Tel. No. 661-859-1174 | |

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)
PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing unfair labor practice and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information may cause the NLRB to decline to invoke its processes.



UNITED STATES GOVERNMENT NATIONAL LABOR RELATIONS BOARD

REGION 32 1301 Clay St Ste 300N Oakland, CA 94612-5224 Agency Website: www.nlrb.gov Telephone: (510)637-3300 Fax: (510)637-3315 Download NLRB Mobile App

August 14, 2020

Maria Silveira, Human Resources Foster Poultry Farms 843 Davis St PO Box 457 Livingston, CA 95334-1525

Re: Foster Poultry Farms

Case 32-CA-264660

Dear Ms. Silveira:

Enclosed is a copy of a charge that has been filed in this case. This letter tells you how to contact the Board agent who will be investigating the charge, explains your right to be represented, discusses presenting your evidence, and provides a brief explanation of our procedures, including how to submit documents to the NLRB.

<u>Investigator</u>: This charge is being investigated by Field Examiner STEPHEN M. SLOPER whose telephone number is (510)671-3045. If this Board agent is not available, you may contact Acting Assistant to the Regional Director HOKULANI VALENCIA whose telephone number is (510)671-3047.

Right to Representation: You have the right to be represented by an attorney or other representative in any proceeding before us. If you choose to be represented, your representative must notify us in writing of this fact as soon as possible by completing Form NLRB-4701, Notice of Appearance. This form is available on our website, www.nlrb.gov, or from an NLRB office upon your request.

If you are contacted by someone about representing you in this case, please be assured that no organization or person seeking your business has any "inside knowledge" or favored relationship with the National Labor Relations Board. Their knowledge regarding this proceeding was only obtained through access to information that must be made available to any member of the public under the Freedom of Information Act.

Presentation of Your Evidence: We seek prompt resolutions of labor disputes. Therefore, I urge you or your representative to submit a complete written account of the facts and a statement of your position with respect to the allegations set forth in the charge as soon as possible. If the Board agent later asks for more evidence, I strongly urge you or your representative to cooperate fully by promptly presenting all evidence relevant to the investigation. In this way, the case can be fully investigated more quickly.

Full and complete cooperation includes providing witnesses to give sworn affidavits to a Board agent, and providing all relevant documentary evidence requested by the Board agent. Sending us your written account of the facts and a statement of your position is not enough to be considered full and complete cooperation. A refusal to fully cooperate during the investigation might cause a case to be litigated unnecessarily.

In addition, either you or your representative must complete the enclosed Commerce Questionnaire to enable us to determine whether the NLRB has jurisdiction over this dispute. If you recently submitted this information in another case, or if you need assistance completing the form, please contact the Board agent.

We will not honor requests to limit our use of position statements or evidence. Specifically, any material you submit may be introduced as evidence at a hearing before an administrative law judge regardless of claims of confidentiality. However, certain evidence produced at a hearing may be protected from public disclosure by demonstrated claims of confidentiality.

Further, the Freedom of Information Act may require that we disclose position statements or evidence in closed cases upon request, unless an exemption applies, such as those protecting confidential financial information or personal privacy interests.

<u>Preservation of all Potential Evidence:</u> Please be mindful of your obligation to preserve all relevant documents and electronically stored information (ESI) in this case, and to take all steps necessary to avoid the inadvertent loss of information in your possession, custody or control. Relevant information includes, but is not limited to, paper documents and all ESI (e.g. SMS text messages, electronic documents, emails, and any data created by proprietary software tools) related to the above-captioned case.

<u>Prohibition on Recording Affidavit Interviews:</u> It is the policy of the General Counsel to prohibit affiants from recording the interview conducted by Board agents when subscribing Agency affidavits. Such recordings may impede the Agency's ability to safeguard the confidentiality of the affidavit itself, protect the privacy of the affiant and potentially compromise the integrity of the Region's investigation.

<u>Correspondence</u>: All documents submitted to the Region regarding your case MUST be filed through the Agency's website, <u>www.nlrb.gov</u>. This includes all formal pleadings, briefs, as well as affidavits, documentary evidence, and position statements. The Agency requests all evidence submitted electronically to be in the form it is normally used and maintained in the course of business (i.e., native format). Where evidence submitted electronically is not in native format, it should be submitted in a manner that retains the essential functionality of the native format (i.e., in a machine-readable and searchable electronic format).

If you have questions about the submission of evidence or expect to deliver a large quantity of electronic records, please promptly contact the Board agent investigating the charge. If you cannot e-file your documents, you must provide a statement explaining why you do not

have access to the means for filing electronically or why filing electronically would impose an undue burden.

In addition, this Region will be issuing case-related correspondence and documents, including complaints, compliance specifications, dismissal letters, deferral letters, and withdrawal letters, electronically to the email address you provide. Please ensure that you receive important case-related correspondence, please ensure that the Board Agent assigned to your case has your preferred email address. These steps will ensure that you receive correspondence faster and at a significantly lower cost to the taxpayer. If there is some reason you are unable to receive correspondence via email, please contact the agent assigned to your case to discuss the circumstances that prevent you from using email.

Information about the Agency, the procedures we follow in unfair labor practice cases and our customer service standards is available on our website, www.nlrb.gov or from an NLRB office upon your request. NLRB Form 4541, Investigative Procedures offers information that is helpful to parties involved in an investigation of an unfair labor practice charge.

We can provide assistance for persons with limited English proficiency or disability. Please let us know if you or any of your witnesses would like such assistance.

Very truly yours,

VALERIE HARDY-MAHONEY Regional Director

Valerie Hardy-Makoney

Enclosures:

- 1. Copy of Charge
- 2. Commerce Questionnaire

| Reviseu 5/21/2011 | Revised 3/21/2011 NATIONAL LABOR RELATIONS BOARD | | | | |
|--|--|--|--|--------|--|
| QUESTIONNAIRE ON COMMERCE INFORMATION | | | | | |
| Please read carefully, answer all applicable ite | ms, and return to the NLRB Office. If additiona | I space is required, please add a page and ide | ntify item number. | | |
| CASE NAME | | CASE | NUMBER | | |
| | | 32-C | A-264660 | | |
| 1. EXACT LEGAL TITLE OF ENTITY (| As filed with State and/or stated in legal do | ocuments forming entity) | | | |
| | | | | | |
| 2. TYPE OF ENTITY | | | | | |
| [] CORPORATION [] LLC [] L | LP [] PARTNERSHIP [] SOLE P | PROPRIETORSHIP [] OTHER (Specif | fy) | | |
| 3. IF A CORPORATION or LLC | Er []TIMTIVEMOIM [] SOZET | ROTHETORSHII [] OTHER (Special | • | | |
| A. STATE OF INCORPORATION | B. NAME, ADDRESS, AND RELATIONS | SHIP (e.g. parent, subsidiary) OF ALL RELA | ATED ENTITIES | | |
| OR FORMATION | | | | | |
| 4. IF AN LLC OR ANY TYPE OF PART | NERSHIP FILL NAME AND ADDRESS | S OF ALL MEMBERS OR PARTNERS | | | |
| 4. II ANVELE ORANI IIIE OI IARI | TVERSITI, I CEL IMME MID MODILES | OF THE MEMBERS ON TAKINERS | | | |
| | | | | | |
| 5. IF A SOLE PROPRIETORSHIP, FUL | LL NAME AND ADDRESS OF PROPRIET | TOR | | | |
| | | | | | |
| 6. BRIEFLY DESCRIBE THE NATURE | OF YOUR OPERATIONS (Products hand | lled or manufactured, or nature of services pe | erformed). | | |
| | | | | | |
| 7. A. PRINCIPAL LOCATION: | B. BRANCH LOCA | ATIONS: | | | |
| | | | | | |
| 8. NUMBER OF PEOPLE PRESENTLY | EMPLOYED | | | | |
| A. Total: | B. At the address involved in this mat | ter: | | | |
| 9. DURING THE MOST RECENT (Chec | | [12 MONTHS or [FISCAL YR (I | FY dates | | |
| . Dellive The most Receivi (ence | in appropriate voxy. | TEMONIAL OF THE IN (I | | YES NO | |
| | CO 50 000 1: 11 1 | | | | |
| A. Did you provide services valued in | excess of \$50,000 directly to customers | outside your State? If no, indicate actua | l value. | | |
| \$ | · | • | | | |
| B. If you answered no to 9A, did you p | rovide services valued in excess of \$50, | 000 to customers in your State who pure | chased goods | | |
| B. If you answered no to 9A, did you p valued in excess of \$50,000 from dir | · | 000 to customers in your State who pure | chased goods | | |
| B. If you answered no to 9A, did you p valued in excess of \$50,000 from dir | rovide services valued in excess of \$50, rectly outside your State? If no, indicate | 000 to customers in your State who pure the value of any such services you | chased goods provided. | | |
| B. If you answered no to 9A, did you p valued in excess of \$50,000 from dir \$ C. If you answered no to 9A and 9B, did newspapers, health care institutions, | rovide services valued in excess of \$50, rectly outside your State? If no, indicate you provide services valued in excess broadcasting stations, commercial build | 000 to customers in your State who pure the value of any such services you pof \$50,000 to public utilities, transit syst | chased goods provided. | | |
| \$ B. If you answered no to 9A, did you p valued in excess of \$50,000 from dir \$ C. If you answered no to 9A and 9B, did newspapers, health care institutions, less than \$50,000, indicate amount. | rovide services valued in excess of \$50, rectly outside your State? If no, indicate you provide services valued in excess broadcasting stations, commercial build \$ | 000 to customers in your State who pure the value of any such services you pof \$50,000 to public utilities, transit systings, educational institutions, or retail co | chased goods provided. tems, oncerns? If | | |
| \$ B. If you answered no to 9A, did you p valued in excess of \$50,000 from dir \$ C. If you answered no to 9A and 9B, did newspapers, health care institutions, less than \$50,000, indicate amount. D. Did you sell goods valued in excess | rovide services valued in excess of \$50, rectly outside your State? If no, indicate you provide services valued in excess broadcasting stations, commercial build \$ | 000 to customers in your State who pure the value of any such services you pof \$50,000 to public utilities, transit systings, educational institutions, or retail co | chased goods provided. tems, oncerns? If | | |
| \$ B. If you answered no to 9A, did you p valued in excess of \$50,000 from dir \$ C. If you answered no to 9A and 9B, did newspapers, health care institutions, less than \$50,000, indicate amount. D. Did you sell goods valued in excess amount. \$ | rovide services valued in excess of \$50, rectly outside your State? If no, indicate you provide services valued in excess broadcasting stations, commercial build \$ of \$50,000 directly to customers located | 000 to customers in your State who pure the value of any such services you por \$50,000 to public utilities, transit systings, educational institutions, or retail cooutside your State? If less than \$50,000 | chased goods provided. tems, oncerns? If | | |
| \$ B. If you answered no to 9A, did you p valued in excess of \$50,000 from dir \$ C. If you answered no to 9A and 9B, did newspapers, health care institutions, less than \$50,000, indicate amount. D. Did you sell goods valued in excess amount. \$ E. If you answered no to 9D, did you sell | rovide services valued in excess of \$50, rectly outside your State? If no, indicate you provide services valued in excess broadcasting stations, commercial build \$ of \$50,000 directly to customers located ell goods valued in excess of \$50,000 directly to customers. | 000 to customers in your State who pure the value of any such services you per \$50,000 to public utilities, transit systings, educational institutions, or retail concurred your State? If less than \$50,000 rectly to customers located inside your S | chased goods provided. tems, oncerns? If | | |
| \$ B. If you answered no to 9A, did you p valued in excess of \$50,000 from dir \$ C. If you answered no to 9A and 9B, did newspapers, health care institutions, less than \$50,000, indicate amount. D. Did you sell goods valued in excess amount. \$ E. If you answered no to 9D, did you sell purchased other goods valued in excess \$ | rovide services valued in excess of \$50, rectly outside your State? If no, indicated you provide services valued in excess broadcasting stations, commercial build \$ of \$50,000 directly to customers located ell goods valued in excess of \$50,000 directly outside you | 000 to customers in your State who pure the value of any such services you per \$50,000 to public utilities, transit systings, educational institutions, or retail computed your State? If less than \$50,000 rectly to customers located inside your State? If less than \$50,000, indicate a | chased goods provided. tems, oncerns? If o, indicate State who amount. | | |
| \$ B. If you answered no to 9A, did you p valued in excess of \$50,000 from dir \$ C. If you answered no to 9A and 9B, did newspapers, health care institutions, less than \$50,000, indicate amount. D. Did you sell goods valued in excess amount. \$ E. If you answered no to 9D, did you sell purchased other goods valued in excess amount. \$ F. Did you purchase and receive goods. | rovide services valued in excess of \$50, rectly outside your State? If no, indicated you provide services valued in excess broadcasting stations, commercial build \$ of \$50,000 directly to customers located ell goods valued in excess of \$50,000 directly outside you | 000 to customers in your State who pure the value of any such services you per \$50,000 to public utilities, transit systings, educational institutions, or retail computed your State? If less than \$50,000 rectly to customers located inside your State? If less than \$50,000, indicate a | chased goods provided. tems, oncerns? If o, indicate State who amount. | | |
| \$ B. If you answered no to 9A, did you p valued in excess of \$50,000 from dir \$ C. If you answered no to 9A and 9B, did newspapers, health care institutions, less than \$50,000, indicate amount. D. Did you sell goods valued in excess amount. \$ E. If you answered no to 9D, did you sell purchased other goods valued in excess amount. \$ F. Did you purchase and receive good amount. \$ | rovide services valued in excess of \$50, rectly outside your State? If no, indicated you provide services valued in excess of broadcasting stations, commercial build \$ of \$50,000 directly to customers located ell goods valued in excess of \$50,000 directly outside you dis valued in excess of \$50,000 from directly outside you have valu | 000 to customers in your State who pure the value of any such services you per \$50,000 to public utilities, transit systings, educational institutions, or retail concurred to customers located inside your Str State? If less than \$50,000, indicate a cetly outside your State? If less than \$50,000, indicate a cetly outside your State? If less than \$50,000, indicate a cetly outside your State? If less than \$50,000, indicate a cetly outside your State? If less than \$50,000, indicate a cetly outside your State? If less than \$50,000, indicate a cetly outside your State? If less than \$50,000, indicate a cetly outside your State? If less than \$50,000, indicate a cetly outside your State? | chased goods provided. tems, oncerns? If O, indicate State who amount. O,000, indicate | | |
| \$ B. If you answered no to 9A, did you p valued in excess of \$50,000 from dir \$ C. If you answered no to 9A and 9B, did newspapers, health care institutions, less than \$50,000, indicate amount. D. Did you sell goods valued in excess amount. \$ E. If you answered no to 9D, did you sell purchased other goods valued in excess amount. \$ F. Did you purchase and receive good amount. \$ G. Did you purchase and receive good amount. | rovide services valued in excess of \$50, rectly outside your State? If no, indicated you provide services valued in excess of broadcasting stations, commercial build \$ of \$50,000 directly to customers located related your services of \$50,000 from directly outside your layer and the valued in excess of \$50,000 from directly outside your layer and you have a surface of \$50,000 from directly you have a surface of \$50, | 000 to customers in your State who pure the value of any such services you per \$50,000 to public utilities, transit systings, educational institutions, or retail concurred to customers located inside your Str State? If less than \$50,000, indicate a cetly outside your State? If less than \$50,000, indicate a cetly outside your State? If less than \$50,000, indicate a cetly outside your State? If less than \$50,000, indicate a cetly outside your State? If less than \$50,000, indicate a cetly outside your State? If less than \$50,000, indicate a cetly outside your State? If less than \$50,000, indicate a cetly outside your State? If less than \$50,000, indicate a cetly outside your State? | chased goods provided. tems, oncerns? If O, indicate State who amount. O,000, indicate | | |
| \$ B. If you answered no to 9A, did you p valued in excess of \$50,000 from dir \$ C. If you answered no to 9A and 9B, did newspapers, health care institutions, less than \$50,000, indicate amount. D. Did you sell goods valued in excess amount. \$ E. If you answered no to 9D, did you sell purchased other goods valued in excess amount. \$ F. Did you purchase and receive good amount. \$ | rovide services valued in excess of \$50, rectly outside your State? If no, indicated you provide services valued in excess of broadcasting stations, commercial build \$ of \$50,000 directly to customers located a self goods valued in excess of \$50,000 directly outside you have valued in excess of \$50,000 from directly outside you have valued in excess of \$50,000 from directly valued in excess of \$50,000 from ente 0,000, indicate amount. \$ | 000 to customers in your State who pure the value of any such services you per \$50,000 to public utilities, transit systings, educational institutions, or retail concurred to customers located inside your State? If less than \$50,000, indicate a cetly outside your State? | chased goods provided. tems, oncerns? If O, indicate State who amount. O,000, indicate | | |
| B. If you answered no to 9A, did you p valued in excess of \$50,000 from did \$ C. If you answered no to 9A and 9B, did newspapers, health care institutions, less than \$50,000, indicate amount. D. Did you sell goods valued in excess amount. \$ E. If you answered no to 9D, did you see purchased other goods valued in excess \$ F. Did you purchase and receive good amount. \$ G. Did you purchase and receive good outside your State? If less than \$5 H. Gross Revenues from all sales or part of the property of t | rovide services valued in excess of \$50, rectly outside your State? If no, indicated you provide services valued in excess of broadcasting stations, commercial build \$ of \$50,000 directly to customers located a self goods valued in excess of \$50,000 directly outside you have valued in excess of \$50,000 from directly outside you have valued in excess of \$50,000 from directly valued in excess of \$50,000 from ente 0,000, indicate amount. \$ | 000 to customers in your State who pure the value of any such services you per \$50,000 to public utilities, transit systems, educational institutions, or retail concurred to customers located inside your State? If less than \$50,000, indicate a certly outside your State? If less than \$50,000, indicate a certly outside your State? If less than \$50,000 indicate a certly outside your State? | chased goods provided. tems, oncerns? If O, indicate State who amount. O,000, indicate | | |
| \$ B. If you answered no to 9A, did you p valued in excess of \$50,000 from dir \$ C. If you answered no to 9A and 9B, did newspapers, health care institutions, less than \$50,000, indicate amount. D. Did you sell goods valued in excess amount. \$ E. If you answered no to 9D, did you se purchased other goods valued in excess \$ F. Did you purchase and receive good amount. \$ G. Did you purchase and receive good outside your State? If less than \$5 H. Gross Revenues from all sales or purchase and sales or pur | rovide services valued in excess of \$50, rectly outside your State? If no, indicated your provide services valued in excess of broadcasting stations, commercial build \$ of \$50,000 directly to customers located a self goods valued in excess of \$50,000 directly outside your law valued in excess of \$50,000 from directly outside your law valued in excess of \$50,000 from enter 0,000, indicate amount. \$ overformance of services (Check the large | 000 to customers in your State who pure the value of any such services you por \$50,000 to public utilities, transit systings, educational institutions, or retail coutside your State? If less than \$50,000 rectly to customers located inside your State? If less than \$50,000, indicate a ctly outside your State? If less than \$50,000, indicate a ctly outside your State? If less than \$50,000, indicate a ctly outside your State? If less than \$50,000, indicate a ctly outside your State? If less than \$50,000, indicate amount): | chased goods provided. tems, oncerns? If O, indicate State who amount. O,000, indicate | | |
| \$ B. If you answered no to 9A, did you p valued in excess of \$50,000 from dir \$ C. If you answered no to 9A and 9B, did newspapers, health care institutions, less than \$50,000, indicate amount. D. Did you sell goods valued in excess amount. \$ E. If you answered no to 9D, did you se purchased other goods valued in excess \$ F. Did you purchase and receive good amount. \$ G. Did you purchase and receive good outside your State? If less than \$5 H. Gross Revenues from all sales or purchase and sales or pur | rovide services valued in excess of \$50, rectly outside your State? If no, indicated your provide services valued in excess of broadcasting stations, commercial build \$ of \$50,000 directly to customers located and the state of \$50,000 directly to customers located and the state of \$50,000 from directly outside your law valued in excess of \$50,000 from directly outside your law valued in excess of \$50,000 from enter 0,000, indicate amount. \$ or formance of services (Check the large 00,000 [] \$1,000,000 or more If less the last 12 months? If yes, specify dates. | 000 to customers in your State who pure the value of any such services you per \$50,000 to public utilities, transit systings, educational institutions, or retail concursive your State? If less than \$50,000 rectly to customers located inside your State? If less than \$50,000, indicate a celly outside your State? If less than \$50,000, indicate a celly outside your State? If less than \$50,000, indicate and \$100,000, indicate amount. | chased goods provided. tems, oncerns? If 0, indicate State who amount. 0,000, indicate from points | | |
| \$ B. If you answered no to 9A, did you p valued in excess of \$50,000 from dir \$ C. If you answered no to 9A and 9B, did newspapers, health care institutions, less than \$50,000, indicate amount. D. Did you sell goods valued in excess amount. \$ E. If you answered no to 9D, did you set purchased other goods valued in excess. F. Did you purchase and receive good amount. \$ G. Did you purchase and receive good outside your State? If less than \$5 the Gross Revenues from all sales or process of the good of the go | rovide services valued in excess of \$50, rectly outside your State? If no, indicated your provide services valued in excess of broadcasting stations, commercial build \$ of \$50,000 directly to customers located a self goods valued in excess of \$50,000 directly outside your law valued in excess of \$50,000 from directly outside your law valued in excess of \$50,000 from enter 0,000, indicate amount. \$ or formance of services (Check the large 1,000,000 [] \$1,000,000 or more If less that last 12 months? If yes, specify data of the last 12 months? If yes, specify data of the last 12 months? If yes, specify data of the last 12 months? If yes, specify data of the last 12 months? If yes, specify data of the last 12 months? If yes, specify data of the last 12 months? If yes, specify data of the last 12 months? | 000 to customers in your State who pure the value of any such services you per \$50,000 to public utilities, transit systings, educational institutions, or retail concursive your State? If less than \$50,000 rectly to customers located inside your State? If less than \$50,000, indicate a celly outside your State? If less than \$50,000, indicate a celly outside your State? If less than \$50,000, indicate and \$100,000, indicate amount. | chased goods provided. tems, oncerns? If 0, indicate State who amount. 0,000, indicate from points | | |
| \$ B. If you answered no to 9A, did you p valued in excess of \$50,000 from dir \$ C. If you answered no to 9A and 9B, did newspapers, health care institutions, less than \$50,000, indicate amount. D. Did you sell goods valued in excess amount. \$ E. If you answered no to 9D, did you sell purchased other goods valued in excess amount. \$ F. Did you purchase and receive good amount. \$ G. Did you purchase and receive good outside your State? If less than \$5 H. Gross Revenues from all sales or provided the selection of | rovide services valued in excess of \$50, rectly outside your State? If no, indicated your provide services valued in excess of broadcasting stations, commercial build \$ of \$50,000 directly to customers located a sell goods valued in excess of \$50,000 directly outside your last valued in excess of \$50,000 from directly outside your last valued in excess of \$50,000 from enteronance of services (Check the large on,000 [] \$1,000,000 or more If less that last 12 months? If yes, specify data to CLATION OR OTHER EMPLOYER GROaddress of association or group). | 2000 to customers in your State who pure the value of any such services you per \$50,000 to public utilities, transit systings, educational institutions, or retail concurside your State? If less than \$50,000 rectly to customers located inside your State? If less than \$50,000, indicate a ctly outside your State? If less than \$50,000, indicate a ctly outside your State? If less than \$50,000, indicate and \$100,000, indicate amount. | chased goods provided. tems, oncerns? If 0, indicate State who amount. 0,000, indicate from points | | |
| B. If you answered no to 9A, did you p valued in excess of \$50,000 from did \$\$ C. If you answered no to 9A and 9B, did newspapers, health care institutions, less than \$50,000, indicate amount. D. Did you sell goods valued in excess amount. \$\$ E. If you answered no to 9D, did you sell purchased other goods valued in excess amount. \$\$ F. Did you purchase and receive good amount. \$\$ G. Did you purchase and receive good outside your State? If less than \$5\$ H. Gross Revenues from all sales or provided the provided in the provided in the provided in the provided in the purchase and receive good outside your State? If less than \$5\$ H. Gross Revenues from all sales or provided in the provided i | rovide services valued in excess of \$50, rectly outside your State? If no, indicated your provide services valued in excess of broadcasting stations, commercial build \$ of \$50,000 directly to customers located a sell goods valued in excess of \$50,000 directly outside your last valued in excess of \$50,000 from directly outside your last valued in excess of \$50,000 from enteropy of the last 12 months? If yes, specify data to class of association or group). | 2000 to customers in your State who pure the value of any such services you per \$50,000 to public utilities, transit systings, educational institutions, or retail concurside your State? If less than \$50,000 rectly to customers located inside your State? If less than \$50,000, indicate a ctly outside your State? If less than \$50,000, indicate a ctly outside your State? If less than \$50,000, indicate and \$100,000, indicate amount. | chased goods provided. tems, oncerns? If 0, indicate State who amount. 0,000, indicate from points | ER | |
| B. If you answered no to 9A, did you p valued in excess of \$50,000 from dir \$ C. If you answered no to 9A and 9B, did newspapers, health care institutions, less than \$50,000, indicate amount. D. Did you sell goods valued in excess amount. \$ E. If you answered no to 9D, did you see purchased other goods valued in excess \$ F. Did you purchase and receive good amount. \$ G. Did you purchase and receive good outside your State? If less than \$5 H. Gross Revenues from all sales or present the second process of the second pr | rovide services valued in excess of \$50, rectly outside your State? If no, indicated your provide services valued in excess of broadcasting stations, commercial build \$ of \$50,000 directly to customers located a sell goods valued in excess of \$50,000 directly outside your last valued in excess of \$50,000 from directly outside your last valued in excess of \$50,000 from enteropy of the last 12 months? If yes, specify data to class of association or group). | 000 to customers in your State who pure the value of any such services you per \$50,000 to public utilities, transit systings, educational institutions, or retail concurside your State? If less than \$50,000 rectly to customers located inside your Str State? If less than \$50,000, indicate a ctly outside your State? If less than \$50,000, indicate a ctly outside your State? If less than \$50,000, indicate and \$100,000, indicate amount. | chased goods provided. tems, oncerns? If 0, indicate State who amount. 0,000, indicate from points E BARGAINING? | ER | |
| \$ B. If you answered no to 9A, did you p valued in excess of \$50,000 from dir \$ C. If you answered no to 9A and 9B, did newspapers, health care institutions, less than \$50,000, indicate amount. D. Did you sell goods valued in excess amount. \$ E. If you answered no to 9D, did you sell goods valued in excess amount. \$ F. Did you purchase and receive good amount. \$ G. Did you purchase and receive good outside your State? If less than \$5 H. Gross Revenues from all sales or provided the second state of th | rovide services valued in excess of \$50, rectly outside your State? If no, indicated your provide services valued in excess of broadcasting stations, commercial build \$ of \$50,000 directly to customers located a sell goods valued in excess of \$50,000 directly outside your last valued in excess of \$50,000 from directly outside your last valued in excess of \$50,000 from enteronance of services (Check the large on the last 12 months? If yes, specify date of the last 12 months? If yes, specify date of the last of the las | on the value of any such services you got \$50,000 to public utilities, transit systings, educational institutions, or retail control outside your State? If less than \$50,000 rectly to customers located inside your State? If less than \$50,000, indicate a certly outside your State? If less than \$50,000, indicate a certly outside your State? If less than \$50,000, indicate a certly outside your State? If less than \$50,000 received the goods directly in the state of the goods directly in the goods directly in the state of the goods directly in the goods directly i | chased goods provided. tems, oncerns? If 0, indicate State who amount. 0,000, indicate from points E BARGAINING? | ER | |
| \$ B. If you answered no to 9A, did you p valued in excess of \$50,000 from dir \$ C. If you answered no to 9A and 9B, did newspapers, health care institutions, less than \$50,000, indicate amount. D. Did you sell goods valued in excess amount. \$ E. If you answered no to 9D, did you sell goods valued in excess amount. \$ F. Did you purchase and receive good amount. \$ G. Did you purchase and receive good outside your State? If less than \$5 H. Gross Revenues from all sales or provided the second state of th | rovide services valued in excess of \$50, rectly outside your State? If no, indicated your provide services valued in excess of broadcasting stations, commercial build \$ of \$50,000 directly to customers located a sell goods valued in excess of \$50,000 directly outside your last valued in excess of \$50,000 from directly outside your last valued in excess of \$50,000 from enteropy on the last valued in excess of \$50,000 from enteropy of the last 12 months? If yes, specify data to class of association or group). ED TO GIVE FURTHER INFORMATION | on the value of any such services you got \$50,000 to public utilities, transit systings, educational institutions, or retail control outside your State? If less than \$50,000 rectly to customers located inside your State? If less than \$50,000, indicate a certly outside your State? If less than \$50,000, indicate a certly outside your State? If less than \$50,000, indicate a certly outside your State? If less than \$50,000 received the goods directly in the state of the goods directly in the goods directly in the state of the goods directly in the goods directly i | chased goods provided. tems, oncerns? If 0, indicate State who amount. 0,000, indicate from points E BARGAINING? | | |
| \$ B. If you answered no to 9A, did you p valued in excess of \$50,000 from dir \$ C. If you answered no to 9A and 9B, did newspapers, health care institutions, less than \$50,000, indicate amount. D. Did you sell goods valued in excess amount. \$ E. If you answered no to 9D, did you se purchased other goods valued in excess amount. \$ F. Did you purchase and receive good amount. \$ G. Did you purchase and receive good outside your State? If less than \$5 H. Gross Revenues from all sales or provided the second state of the secon | rovide services valued in excess of \$50, rectly outside your State? If no, indicated your provide services valued in excess of broadcasting stations, commercial build \$ of \$50,000 directly to customers located a sell goods valued in excess of \$50,000 directly outside your last valued in excess of \$50,000 from directly outside your last valued in excess of \$50,000 from enteronance of services (Check the large on the last 12 months? If yes, specify date the last 12 months? If yes, specify date of the last o | 2000 to customers in your State who pure the value of any such services you per \$50,000 to public utilities, transit systings, educational institutions, or retail concurside your State? If less than \$50,000 rectly to customers located inside your Str State? If less than \$50,000, indicate a ctly outside your State? If less than \$50,000, indicate a ctly outside your State? If less than \$50,000, indicate a ctly outside your State? If less than \$50,000, indicate a ctly outside your State? If less than \$50,000, indicate a ctly outside your State? If less than \$50,000 rectly outside your State? If less than \$50,000, indicate a ctly outside your State? | chased goods provided. tems, oncerns? If 0, indicate State who amount. 0,000, indicate from points E BARGAINING? TEL. NUMBE | | |

PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and/or unfair labor practice proceedings and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary. However, failure to supply the information may cause the NLRB to refuse to process any further a representation or unfair labor practice case, or may cause the NLRB to issue you a subpoena and seek enforcement of the subpoena in federal court.



UNITED STATES GOVERNMENT NATIONAL LABOR RELATIONS BOARD



Download NLRB Mobile App

REGION 32 1301 Clay St Ste 300N Oakland, CA 94612-5224

August 14, 2020

Agency Website: www.nlrb.gov

Telephone: (510)637-3300

Fax: (510)637-3315

United Farms Workers of America 29700 Woodford-Tehachapi Rd PO Box 62 Keene, CA 93531

> Re: Foster Poultry Farms Case 32-CA-264660

Dear Sir or Madam:

The charge that you filed in this case on August 13, 2020 has been docketed as case number 32-CA-264660. This letter tells you how to contact the Board agent who will be investigating the charge, explains your right to be represented, discusses presenting your evidence, and provides a brief explanation of our procedures, including how to submit documents to the NLRB.

<u>Investigator</u>: This charge is being investigated by Field Examiner STEPHEN M. SLOPER whose telephone number is (510)671-3045. If this Board agent is not available, you may contact Acting Assistant to the Regional Director HOKULANI VALENCIA whose telephone number is (510)671-3047.

Right to Representation: You have the right to be represented by an attorney or other representative in any proceeding before us. If you choose to be represented, your representative must notify us in writing of this fact as soon as possible by completing *Form NLRB-4701*, *Notice of Appearance*. This form is available on our website, www.nlrb.gov, or from an NLRB office upon your request.

If you are contacted by someone about representing you in this case, please be assured that no organization or person seeking your business has any "inside knowledge" or favored relationship with the National Labor Relations Board. Their knowledge regarding this proceeding was only obtained through access to information that must be made available to any member of the public under the Freedom of Information Act.

Presentation of Your Evidence: As the party who filed the charge in this case, it is your responsibility to meet with the Board agent to provide a sworn affidavit, or provide other witnesses to provide sworn affidavits, and to provide relevant documents within your possession. Because we seek to resolve labor disputes promptly, you should be ready to promptly present your affidavit(s) and other evidence. If you have not yet scheduled a date and time for the Board agent to take your affidavit, please contact the Board agent to schedule the affidavit(s). If you

fail to cooperate in promptly presenting your evidence, your charge may be dismissed without investigation.

<u>Preservation of all Potential Evidence:</u> Please be mindful of your obligation to preserve all relevant documents and electronically stored information (ESI) in this case, and to take all steps necessary to avoid the inadvertent loss of information in your possession, custody or control. Relevant information includes, but is not limited to, paper documents and all ESI (e.g. SMS text messages, electronic documents, emails, and any data created by proprietary software tools) related to the above-captioned case.

<u>Prohibition on Recording Affidavit Interviews:</u> It is the policy of the General Counsel to prohibit affiants from recording the interview conducted by Board agents when subscribing Agency affidavits. Such recordings may impede the Agency's ability to safeguard the confidentiality of the affidavit itself, protect the privacy of the affiant and potentially compromise the integrity of the Region's investigation.

<u>Correspondence</u>: All documents submitted to the Region regarding your case MUST be filed through the Agency's website, <u>www.nlrb.gov</u>. This includes all formal pleadings, briefs, as well as affidavits, documentary evidence, and position statements. The Agency requests all evidence submitted electronically to be in the form it is normally used and maintained in the course of business (i.e., native format). Where evidence submitted electronically is not in native format, it should be submitted in a manner that retains the essential functionality of the native format (i.e., in a machine-readable and searchable electronic format).

If you have questions about the submission of evidence or expect to deliver a large quantity of electronic records, please promptly contact the Board agent investigating the charge. If you cannot e-file your documents, you must provide a statement explaining why you do not have access to the means for filing electronically or why filing electronically would impose an undue burden.

In addition, this Region will be issuing case-related correspondence and documents, including complaints, compliance specifications, dismissal letters, deferral letters, and withdrawal letters, electronically to the email address you provide. Please ensure that you receive important case-related correspondence, please ensure that the Board Agent assigned to your case has your preferred email address. These steps will ensure that you receive correspondence faster and at a significantly lower cost to the taxpayer. If there is some reason you are unable to receive correspondence via email, please contact the agent assigned to your case to discuss the circumstances that prevent you from using email.

Information about the Agency, the procedures we follow in unfair labor practice cases and our customer service standards is available on our website, www.nlrb.gov or from an NLRB office upon your request. NLRB Form 4541, Investigative Procedures offers information that is helpful to parties involved in an investigation of an unfair labor practice charge.

We can provide assistance for persons with limited English proficiency or disability. Please let us know if you or any of your witnesses would like such assistance.

Very truly yours,

VALERIE HARDY-MAHONEY

Regional Director

cc: Aida L. Sotelo, Legal Assistant

P.O. Box 1998

Bakersfield, CA 93303

NATIONAL LABOR RELATIONS BOARD

NOTICE OF APPEARANCE

| and United Farm Workers of America | CASE 32-CA-264660 |
|--|---|
| X REGIONAL DIRECTOR EXECUTIVE SECRETARY NATIONAL LABOR RELATIONS BOARD Washington, DC 20570 | GENERAL COUNSEL NATIONAL LABOR RELATIONS BOARD Washington, DC 20570 |
| THE UNDERSIGNED HEREBY ENTERS APPEARANCE AS REPRESENTATION IN THE STATE OF AMERICA | IVE OF |
| N THE ABOVE-CAPTIONED MATTER. | y. |
| | |
| REPRESENTATIVE IS AN ATTORNEY IF REPRESENTATIVE IS AN ATTORNEY, IN ORDER TO ENSURE TO CERTAIN DOCUMENTS OR CORRESPONDENCE FROM THE AGENCY IN BOX MUST BE CHECKED. IF THIS BOX IS NOT CHECKED, THE PARTY WOOCUMENTS SUCH AS CHARGES, PETITIONS AND FORMAL DOCUMENTS. | ADDITION TO THOSE DESCRIBED BELOW, THIS VILL RECEIVE ONLY COPIES OF CERTAIN |
| REPRESENTATIVE IS AN ATTORNEY, IN ORDER TO ENSURE TO CERTAIN DOCUMENTS OR CORRESPONDENCE FROM THE AGENCY IN BOX MUST BE CHECKED. IF THIS BOX IS NOT CHECKED, THE PARTY WOOCUMENTS SUCH AS CHARGES, PETITIONS AND FORMAL DOCUMENT CASEHANDLING MANUAL. (REPRESENTATIVE INFORMAL) | ADDITION TO THOSE DESCRIBED BELOW, THIS VILL RECEIVE ONLY COPIES OF CERTAIN IS AS DESCRIBED IN SEC. 11842.3 OF THE |
| REPRESENTATIVE IS AN ATTORNEY, IN ORDER TO ENSURE TO CERTAIN DOCUMENTS OR CORRESPONDENCE FROM THE AGENCY IN BOX MUST BE CHECKED. IF THIS BOX IS NOT CHECKED, THE PARTY WOOCUMENTS SUCH AS CHARGES, PETITIONS AND FORMAL DOCUMENT CASEHANDLING MANUAL. (REPRESENTATIVE INFORMAL MARIE) | ADDITION TO THOSE DESCRIBED BELOW, THIS VILL RECEIVE ONLY COPIES OF CERTAIN IS AS DESCRIBED IN SEC. 11842.3 OF THE |
| REPRESENTATIVE IS AN ATTORNEY, IN ORDER TO ENSURE TO CERTAIN DOCUMENTS OR CORRESPONDENCE FROM THE AGENCY IN BOX MUST BE CHECKED. IF THIS BOX IS NOT CHECKED, THE PARTY WOOCUMENTS SUCH AS CHARGES, PETITIONS AND FORMAL DOCUMENT CASEHANDLING MANUAL. (REPRESENTATIVE INFORMAL MARTINE MARTIN | ADDITION TO THOSE DESCRIBED BELOW, THIS VILL RECEIVE ONLY COPIES OF CERTAIN IS AS DESCRIBED IN SEC. 11842.3 OF THE |
| REPRESENTATIVE IS AN ATTORNEY, IN ORDER TO ENSURE TO CERTAIN DOCUMENTS OR CORRESPONDENCE FROM THE AGENCY IN BOX MUST BE CHECKED. IF THIS BOX IS NOT CHECKED, THE PARTY WE COCUMENTS SUCH AS CHARGES, PETITIONS AND FORMAL DOCUMENTS CASEHANDLING MANUAL. (REPRESENTATIVE INFORMAL MARKE) Mario Martinez NAME: P.O. Box 1998, Bakersfield, CA 93303 | ADDITION TO THOSE DESCRIBED BELOW, THIS VILL RECEIVE ONLY COPIES OF CERTAIN IS AS DESCRIBED IN SEC. 11842.3 OF THE |
| REPRESENTATIVE IS AN ATTORNEY, IN ORDER TO ENSURE TO CERTAIN DOCUMENTS OR CORRESPONDENCE FROM THE AGENCY IN BOX MUST BE CHECKED. IF THIS BOX IS NOT CHECKED, THE PARTY WE DOCUMENTS SUCH AS CHARGES, PETITIONS AND FORMAL DOCUMENTS CASEHANDLING MANUAL. (REPRESENTATIVE INFORMAL MARKE: Mario Martinez P.O. Box 1998. Bakersfield. CA 93303 | ADDITION TO THOSE DESCRIBED BELOW, THIS VILL RECEIVE ONLY COPIES OF CERTAIN IS AS DESCRIBED IN SEC. 11842.3 OF THE |
| REPRESENTATIVE IS AN ATTORNEY. IN ORDER TO ENSURE TO CERTAIN DOCUMENTS OR CORRESPONDENCE FROM THE AGENCY IN BOX MUST BE CHECKED. IF THIS BOX IS NOT CHECKED, THE PARTY WE DOCUMENTS SUCH AS CHARGES, PETITIONS AND FORMAL DOCUMENTS CASEHANDLING MANUAL. (REPRESENTATIVE INFORMAL MARKE: MAILING ADDRESS: P.O. Box 1998, Bakersfield, CA 93303 E-MAIL ADDRESS: info@farmworkerlaw.com | ADDITION TO THOSE DESCRIBED BELOW, THIS VILL RECEIVE ONLY COPIES OF CERTAIN IS AS DESCRIBED IN SEC. 11842.3 OF THE |
| IF REPRESENTATIVE IS AN ATTORNEY, IN ORDER TO ENSURE TO CERTAIN DOCUMENTS OR CORRESPONDENCE FROM THE AGENCY IN BOX MUST BE CHECKED. IF THIS BOX IS NOT CHECKED, THE PARTY WE DOCUMENTS SUCH AS CHARGES, PETITIONS AND FORMAL DOCUMENT CASEHANDLING MANUAL. (REPRESENTATIVE INFORMAL MARKE: MARIE: MAILING ADDRESS: P.O. Box 1998, Bakersfield, CA 93303 E-MAIL ADDRESS: info@farmworkerlaw.com OFFICE TELEPHONE NUMBER: 661-859-1174 | ADDITION TO THOSE DESCRIBED BELOW, THIS VILL RECEIVE ONLY COPIES OF CERTAIN IS AS DESCRIBED IN SEC. 11842.3 OF THE MATION) |

 $^{^{}m l}$ IF CASE IS PENDING IN WASHINGTON AND NOTICE OF APPEARANCE IS SENT TO THE GENERAL COUNSEL OR THE EXECUTIVE SECRETARY, A COPY SHOULD BE SENT TO THE REGIONAL DIRECTOR OF THE REGION IN WHICH THE CASE WAS FILED SO THAT THOSE RECORDS WILL REFLECT THE APPEARANCE.

NATIONAL LABOR RELATIONS BOARD

NOTICE OF APPEARANCE

| | 1 |
|---|--|
| Foster Poultry Farms | |
| and | CASE 32-CA-264660 |
| | |
| United Farm Workers of America | |
| | |
| REGIONAL DIRECTOR EXECUTIVE SECRETARY NATIONAL LABOR RELATIONS BOARD Washington, DC 20570 | GENERAL COUNSEL NATIONAL LABOR RELATIONS BOARD Washington, DC 20570 |
| | |
| THE UNDERSIGNED HEREBY ENTERS APPEARANCE AS REPRESENTAT | TIVE OF |
| Foster Poultry Farms | |
| • | |
| IN THE ABOVE-CAPTIONED MATTER. | |
| CHECK THE APPROPRIATE BOX(ES) BELOW: | |
| REPRESENTATIVE IS AN ATTORNEY | |
| ☐ IF REPRESENTATIVE IS AN ATTORNEY, IN ORDER TO ENSURE CERTAIN DOCUMENTS OR CORRESPONDENCE FROM THE AGENCY IN BOX MUST BE CHECKED. IF THIS BOX IS NOT CHECKED, THE PARTY V DOCUMENTS SUCH AS CHARGES, PETITIONS AND FORMAL DOCUMEN CASEHANDLING MANUAL. | ADDITION TO THOSE DESCRIBED BELOW, THIS WILL RECEIVE ONLY COPIES OF CERTAIN' |
| (REPRESENTATIVE INFOR | MATION) |
| NAME: Nick C. Geannacopulos and Jennifer L. Mora | |
| MAILING ADDRESS: SEYFARTH SHAW LLP, 560 Mission Street, 3 | 11st Floor, San Francisco, California 94105 |
| E-MAIL ADDRESS: ngeannacopulos@seyfarth.com/jmora@seyfarth. | .com |
| OFFICE TELEPHONE NUMBER: (415) 397-2823 / (415) 732-1146 | |
| CELL PHONE NUMBER: | FAX: (415) 397-8549 |
| SIGNATURE:/s/ Jennifer L. Mora | |
| (Please sign in ink.) | |
| DATE: August 27, 2020 | |

American LegalNet, Inc. www.USCourtForms.com

¹ IF CASE IS PENDING IN WASHINGTON AND NOTICE OF APPEARANCE IS SENT TO THE GENERAL COUNSEL OR THE EXECUTIVE SECRETARY, A COPY SHOULD BE SENT TO THE REGIONAL DIRECTOR OF THE REGION IN WHICH THE CASE WAS FILED SO THAT THOSE RECORDS WILL REFLECT THE APPEARANCE.

REGION 32 1301 Clay St Ste 300N Oakland, CA 94612-5224 Agency Website: www.nlrb.gov Telephone: (510)637-3300 Fax: (510)637-3315

November 10, 2020

AIDA L. SOTELO, LEGAL ASSISTANT P.O. BOX 1998 BAKERSFIELD, CA 93303

MARIO MARTINEZ, ESQ. UNITED FARM WORKERS OF AMERICA PO BOX 1998 BAKERSFIELD, CA 93303-1998

Re: Foster Poultry Farms

Cases 32-CA-264660, 32-CA-265370,

32-CA-266430

Dear Ms. Sotelo and Mr. Martinez:

We have carefully investigated and considered your charges that Foster Poultry Farms has violated the National Labor Relations Act.

Decision to Dismiss: Based on that investigation, I have decided to dismiss your charges for the reasons discussed below.

In Case 32-CA-264660, you allege that the Employer violated section 8(a)(5) of the Act by refusing to provide the Union with requested information, specifically pay stub data for 2,400 individual employees for each pay period during a three-year period. The investigation revealed that after requesting the data, the Union and the Employer engaged in negotiations concerning what would be provided and the manner of production. As a result of those negotiations, the Employer provided data to you for the 3-month periods of 2017, 2018, 2019, and 2020. Subsequent to receipt of this information, you did not notify the Employer that the information provided was deficient. Thereafter, you have not had further dealings or communications with the Employer regarding the adequacy of the information you sought. In light of this, there is no evidence establishing that the Employer violated the Act as alleged.

In Case 32-CA-265370, as elaborated on during the investigation, you allege that the Employer violated Section 8(a)(5) of the Act by withdrawing a union security proposal during contract bargaining. The investigation revealed that during negotiations over a successor agreement, the parties attempted to negotiate revisions to the existing union security provision. Subsequently, the Union claimed that the Employer had agreed to a union security proposal as part of an overall agreement. When the Employer allegedly refused to honor that purported agreement, the Union filed a charge in Case 32-CA-260888 alleging that the Employer refused to comply with the agreement. The Region dismissed that charge, finding that there was no meeting of the minds on the union security provision. After negotiations resumed, the Employer notified the Union that it was withdrawing the prior proposal on union security. Since that time, however, it has continued to negotiate with the Union about union security as well as about other matters. The withdrawal of a prior proposal during bargaining is insufficient to establish a

violation of the Act; rather the withdrawal must be evaluated in the context of all the circumstances. *White Cap*, 325 NLRB 1166 (1998). Under these circumstances, the withdrawal of the union security proposal does not establish a failure to bargain in good faith. I am, therefore, declining to issue a complaint.

In Case 32-CA-266430, you allege that the Employer violated the Act because it insisted on the Union providing bargaining proposals in writing. The investigation revealed that since bargaining resumed on the contract, the parties have met virtually due to the COVID-19 pandemic. At some of the sessions, the Employer asked that proposals be made in writing. The Union resisted, claiming that the Employer could not insist on written proposals. In response, the Employer asked the Union to state its proposals orally, and the Union asserts that the Employer declined to accept them. The evidence shows that the Employer and the Union continue to bargain, sometimes through written proposals. In view of these facts where the Employer's intermittent insistence on written proposals did not impede overall bargaining, there is no basis for finding a violation of the Act. I am, therefore, refusing to issue complaint on this matter.

Charging Party's Right to Appeal: The Charging Party may appeal my decision to the General Counsel of the National Labor Relations Board, through the Office of Appeals.

Means of Filing: You must file your appeal electronically or provide a written statement explaining why electronic submission is not possible or feasible (Written instructions for the NLRB's E-Filing system and the Terms and Conditions of the NLRB's E-Filing policy are available at www.nlrb.gov. See User Guide. A video demonstration which provides step-by-step instructions and frequently asked questions are also available at www.nlrb.gov. If you require additional assistance with E-Filing, please contact e-Filing@nlrb.gov.

You are encouraged to also submit a complete statement of the facts and reasons why you believe my decision was incorrect. If you cannot file electronically, please send the appeal and your written explanation of why you cannot file electronically to the **General Counsel** at the **National Labor Relations Board, Attn: Office of Appeals, 1015 Half Street SE, Washington, DC 20570-0001**. Unless filed electronically, a copy of the appeal should also be sent to me.

The appeal MAY NOT be filed by fax or email. The Office of Appeals will not process faxed or emailed appeals.

Appeal Due Date: The appeal is due on November 24, 2020. If the appeal is filed electronically, the transmission of the entire document through the Agency's website must be completed no later than 11:59 p.m. Eastern Time on the due date. If filing by mail or by delivery service an appeal will be found to be timely filed if it is postmarked or given to a delivery service no later than November 23, 2020. If an appeal is postmarked or given to a delivery service on the due date, it will be rejected as untimely. If hand delivered, an appeal must be received by the General Counsel in Washington D.C. by 5:00 p.m. Eastern Time on the appeal due date. If an appeal is not submitted in accordance with this paragraph, it will be rejected.

Extension of Time to File Appeal: The General Counsel may allow additional time to file the appeal if the Charging Party provides a good reason for doing so and the request for an

extension of time is **received on or before November 24, 2020.** The request may be filed electronically through the *E-File Documents* link on our website www.nlrb.gov, by fax to (202)273-4283, by mail, or by delivery service. The General Counsel will not consider any request for an extension of time to file an appeal received after November 24, 2020, **even if it is postmarked or given to the delivery service before the due date**. Unless filed electronically, a copy of the extension of time should also be sent to me.

Confidentiality: We will not honor requests to limit our use of appeal statements or evidence. Upon a request under the Freedom of Information Act (FOIA) by a party during the processing of an appeal, the Agency's FOIA Branch discloses appeal statements, redacted for personal privacy, confidential source protection, or other applicable FOIA exemptions. In the event the appeal is sustained, any statement or material submitted may be introduced as evidence at a hearing before an administrative law judge. However, certain evidence produced at a hearing may be protected from public disclosure by demonstrated claims of confidentiality.

Very truly yours,

Valerie Hardy-Mahoney Regional Director

Valerie Hardy-Makoney

Enclosure

cc: UNITED FARMS WORKERS OF AMERICA 29700 WOODFORD-TEHACHAPI RD PO BOX 62 KEENE, CA 93531

> MARIA SILVEIRA, HUMAN RESOURCES FOSTER POULTRY FARMS 843 DAVIS STREET PO BOX 457 LIVINGSTON, CA 95334-1525

JENNIFER L MORA, ATTORNEY SEYFARTH SHAW LLP 560 MISSION STREET, SUITE 3100 SAN FRANCISCO, CA 94105

NICK C. GEANNACOPULOS, ATTORNEY SEYFARTH SHAW LLP 560 MISSION STREET SUITE 3100 SAN FRANCISCO, CA 94105-2930 FORM NLRB-501 (2-18)

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST EMPLOYER

DO NOT WRITE IN THIS SPACE

32-CA-265370

Date Filed 08/28/2020

INSTRUCTIONS:

| | OYER AGAINST WHOM CHARGE IS BROUGHT | | |
|---|--|---|--|
| a. Name of Employer FOSTER POULTRY FARMS | | b. Tel. No. 209-394-7901 | |
| | | c. Cell No. | |
| | T | f. Fax. No. | |
| d. Address (Street, city, state, and ZIP code) | e. Employer Representative | g. e-mail | |
| 843 Davis Street PO Box 457 | Maria Silveira, Human Resources | maria.silveira@fosterfarms.com | |
| Livingston, CA 95334 | | h. Number of workers employed 2,700 | |
| i. Type of Establishment (factory, mine, wholesaler, etc.) Poultry Processing | j. Identify principal product or service Poultry Processing | | |
| The above-named employer has engaged in and is engaged | ging in unfair labor practices within the meaning of s | ection 8(a), subsections (1) and | |
| (list subsections) 8(a)(1) and 8(a)(5) | | bor Relations Act, and thest unfair labor | |
| practices are practices affecting commerce within the me | | | |
| the Act and the Postal Reorganization Act. | | | |
| 2. Basis of the Charge (set forth a clear and concise state | ement of the facts constituting the alleged unfair labo | or practices) | |
| On or about August 25, 2020 and continuing to da | te, the employer, Foster Poultry Farms, through | h its representatives and counsel has | |
| engaged in bad faith bargaining by withdrawing fr | om agreements previously agreed to with no in | estification of discussion thus area in | |
| in illegal regressive bargaining in violation of the | A of | ustification of discussion, thus engaging | |
| in megar regressive bargaining in violation of the | ACL. | | |
| | | | |
| | | | |
| | | | |
| 3. Full name of party filing charge (if labor organization, g | ive full name, including local name and number) | | |
| 3. Full name of party filing charge (if labor organization, g United Farm Workers of America ("UFW") | | | |
| 4a. Address (Street and number, city, state, and ZIP code | 9) | 4b, Tel. No. | |
| | | 10.75.710. | |
| 29700 Woodford-Tehachapi Road P.O. Box 62 | | 4c. Cell No. | |
| Keene, CA 93531 | | 661-972-1176 | |
| 1 | | 4d. Fax No. | |
| | | 4e. e-mail | |
| | | enavarrete@ufw.org | |
| 5. Full name of national or international labor organization | of which it is an affiliate or constituent unit (to be fille | ed in when charge is filed by a labor organization) | |
| United Farm Workers of America ("UFW") | | | |
| | | | |
| / I declare that I have read the abo | ARATION ve charge and that the statements by knowledge and belief. | Tel. No. 661-859-1174 | |
| 14 | Aida L. Sotelo, Legal Assistant | Office, if any, Cell No. | |
| (signature of representative or person making charge) | (Print/type name and title or office, if any) | Fax No. 661-840-6154 | |
| DO D 1000 D 7 7 | | e-mail | |
| Address PO Box 1998, Bakersfield, CA 93303 | Date 8/27/2020 | info@farmworkerlaw.com | |

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)
PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing unfair labor practice and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information may cause the NLRB to decline to invoke its processes.



UNITED STATES GOVERNMENT NATIONAL LABOR RELATIONS BOARD

Agency Website: www.nlrb.gov Telephone: (510)637-3300 Fax: (510)637-3315 Download NLRB Mobile App

August 28, 2020

Maria Silveira, Human Resources Foster Poultry Farms 843 Davis Street PO Box 457 Livingston CA 95334-1525

REGION 32

1301 Clay St Ste 300N

Oakland, CA 94612-5224

Re: Foster Poultry Farms

Case 32-CA-265370

Dear Ms. Silveira:

Enclosed is a copy of a charge that has been filed in this case. This letter tells you how to contact the Board agent who will be investigating the charge, explains your right to be represented, discusses presenting your evidence, and provides a brief explanation of our procedures, including how to submit documents to the NLRB.

<u>Investigator</u>: This charge is being investigated by Field Examiner STEPHEN M. SLOPER whose telephone number is (510)671-3045. If this Board agent is not available, you may contact Acting Assistant to the Regional Director HOKULANI VALENCIA whose telephone number is (510)671-3047.

Right to Representation: You have the right to be represented by an attorney or other representative in any proceeding before us. If you choose to be represented, your representative must notify us in writing of this fact as soon as possible by completing Form NLRB-4701, Notice of Appearance. This form is available on our website, www.nlrb.gov, or from an NLRB office upon your request.

If you are contacted by someone about representing you in this case, please be assured that no organization or person seeking your business has any "inside knowledge" or favored relationship with the National Labor Relations Board. Their knowledge regarding this proceeding was only obtained through access to information that must be made available to any member of the public under the Freedom of Information Act.

<u>Presentation of Your Evidence:</u> We seek prompt resolutions of labor disputes. Therefore, I urge you or your representative to submit a complete written account of the facts and a statement of your position with respect to the allegations set forth in the charge as soon as possible. If the Board agent later asks for more evidence, I strongly urge you or your representative to cooperate fully by promptly presenting all evidence relevant to the investigation. In this way, the case can be fully investigated more quickly.

Full and complete cooperation includes providing witnesses to give sworn affidavits to a Board agent, and providing all relevant documentary evidence requested by the Board agent. Sending us your written account of the facts and a statement of your position is not enough to be considered full and complete cooperation. A refusal to fully cooperate during the investigation might cause a case to be litigated unnecessarily.

In addition, either you or your representative must complete the enclosed Commerce Questionnaire to enable us to determine whether the NLRB has jurisdiction over this dispute. If you recently submitted this information in another case, or if you need assistance completing the form, please contact the Board agent.

We will not honor requests to limit our use of position statements or evidence. Specifically, any material you submit may be introduced as evidence at a hearing before an administrative law judge regardless of claims of confidentiality. However, certain evidence produced at a hearing may be protected from public disclosure by demonstrated claims of confidentiality.

Further, the Freedom of Information Act may require that we disclose position statements or evidence in closed cases upon request, unless an exemption applies, such as those protecting confidential financial information or personal privacy interests.

<u>Preservation of all Potential Evidence:</u> Please be mindful of your obligation to preserve all relevant documents and electronically stored information (ESI) in this case, and to take all steps necessary to avoid the inadvertent loss of information in your possession, custody or control. Relevant information includes, but is not limited to, paper documents and all ESI (e.g. SMS text messages, electronic documents, emails, and any data created by proprietary software tools) related to the above-captioned case.

<u>Prohibition on Recording Affidavit Interviews:</u> It is the policy of the General Counsel to prohibit affiants from recording the interview conducted by Board agents when subscribing Agency affidavits. Such recordings may impede the Agency's ability to safeguard the confidentiality of the affidavit itself, protect the privacy of the affiant and potentially compromise the integrity of the Region's investigation.

<u>Correspondence</u>: All documents submitted to the Region regarding your case MUST be filed through the Agency's website, <u>www.nlrb.gov</u>. This includes all formal pleadings, briefs, as well as affidavits, documentary evidence, and position statements. The Agency requests all evidence submitted electronically to be in the form it is normally used and maintained in the course of business (i.e., native format). Where evidence submitted electronically is not in native format, it should be submitted in a manner that retains the essential functionality of the native format (i.e., in a machine-readable and searchable electronic format).

If you have questions about the submission of evidence or expect to deliver a large quantity of electronic records, please promptly contact the Board agent investigating the charge. If you cannot e-file your documents, you must provide a statement explaining why you do not

have access to the means for filing electronically or why filing electronically would impose an undue burden.

- 3 -

In addition, this Region will be issuing case-related correspondence and documents, including complaints, compliance specifications, dismissal letters, deferral letters, and withdrawal letters, electronically to the email address you provide. Please ensure that you receive important case-related correspondence, please ensure that the Board Agent assigned to your case has your preferred email address. These steps will ensure that you receive correspondence faster and at a significantly lower cost to the taxpayer. If there is some reason you are unable to receive correspondence via email, please contact the agent assigned to your case to discuss the circumstances that prevent you from using email.

Information about the Agency, the procedures we follow in unfair labor practice cases and our customer service standards is available on our website, www.nlrb.gov or from an NLRB office upon your request. NLRB Form 4541, Investigative Procedures offers information that is helpful to parties involved in an investigation of an unfair labor practice charge.

We can provide assistance for persons with limited English proficiency or disability. Please let us know if you or any of your witnesses would like such assistance.

Very truly yours,

VALERIE HARDY-MAHONEY Regional Director

Enclosures:

- 1. Copy of Charge
- 2. Commerce Questionnaire

| 100 1304 0/21/2011 | Revised 3/21/2011 NATIONAL LABOR RELATIONS BOARD | | | |
|---|---|--|--|---|
| QUESTIONNAIRE ON COMMERCE INFORMATION | | | | |
| Please read carefully, answer all applicable ite | ms, and return to the NLRB Office. If additional | space is required, please add a page and identify | / item number. | |
| CASE NAME | | CASE NU | MBER | |
| | | 32-CA- | -265370 | |
| 1. EXACT LEGAL TITLE OF ENTITY (| As filed with State and/or stated in legal doc | cuments forming entity) | | |
| | | | | |
| 2. TYPE OF ENTITY | | | _ | |
| [] CORPORATION [] LLC [] L | LP [] PARTNERSHIP [] SOLE P | ROPRIETORSHIP [] OTHER (Specify) | | |
| 3. IF A CORPORATION or LLC | EI [] MARTHERSINI [] SOLETI | [] OTHER (Speeny) | | |
| A. STATE OF INCORPORATION | B. NAME, ADDRESS, AND RELATIONS | HIP (e.g. parent, subsidiary) OF ALL RELATE | D ENTITIES | |
| OR FORMATION | | | | |
| 4 IF AN LLC OR ANY TYPE OF PART | TNERSHIP, FULL NAME AND ADDRESS | OF ALL MEMBERS OR PARTNERS | | |
| 4. If ANY ELEC OR ANY ITTE OF TAKE | TIVE ROLL THE THE PROPERTY | OT ALL MEMBERS OR FARTILERS | | |
| | | | | |
| 5. IF A SOLE PROPRIETORSHIP, FUL | LL NAME AND ADDRESS OF PROPRIET | OR | | |
| | | | | |
| 6. BRIEFLY DESCRIBE THE NATURE | COF YOUR OPERATIONS (Products handle | ed or manufactured, or nature of services perfo | ormed). | |
| | | | | |
| 7. A. PRINCIPAL LOCATION: | B. BRANCH LOCA | ΓΙΟΝS: | | |
| | | | | |
| 8. NUMBER OF PEOPLE PRESENTLY | 'EMPLOYED | | | |
| A. Total: | B. At the address involved in this matter | ×ŗ• | | |
| 9. DURING THE MOST RECENT (Chec | | [12 MONTHS or FISCAL YR <i>(FY a</i> | dates |) |
| . Definite the most receive (one | en appropriate boxy. CHEENDING IN | | YES NO | |
| | 20.50.000 1: 1 | | | 5 |
| A. Did you provide services valued in | excess of \$50,000 directly to customers of | utside your State? If no, indicate actual va | alue. | Ó |
| \$ | · | • | | 0 |
| B. If you answered no to 9A, did you p | rovide services valued in excess of \$50,0 | 000 to customers in your State who purchase | sed goods | 0 |
| B. If you answered no to 9A, did you p valued in excess of \$50,000 from did | rovide services valued in excess of \$50,0 | • | sed goods | 0 |
| B. If you answered no to 9A, did you p valued in excess of \$50,000 from dir | rovide services valued in excess of \$50,0 rectly outside your State? If no, indicate | 00 to customers in your State who purchast the value of any such services you pro | sed goods ovided. | 0 |
| B. If you answered no to 9A, did you p valued in excess of \$50,000 from dis \$ C. If you answered no to 9A and 9B, did newspapers, health care institutions, | rovide services valued in excess of \$50,0 rectly outside your State? If no, indicate you provide services valued in excess o broadcasting stations, commercial building | 000 to customers in your State who purchase | sed goods ovided. | 0 |
| B. If you answered no to 9A, did you p valued in excess of \$50,000 from dis \$ C. If you answered no to 9A and 9B, did newspapers, health care institutions, less than \$50,000, indicate amount. | rovide services valued in excess of \$50,0 rectly outside your State? If no, indicate you provide services valued in excess of broadcasting stations, commercial building | 00 to customers in your State who purchast the value of any such services you prof \$50,000 to public utilities, transit system ags, educational institutions, or retail concerns. | sed goods ovided. is, erns? If | 0 |
| \$ B. If you answered no to 9A, did you p valued in excess of \$50,000 from dir \$ C. If you answered no to 9A and 9B, did newspapers, health care institutions, less than \$50,000, indicate amount. D. Did you sell goods valued in excess | rovide services valued in excess of \$50,0 rectly outside your State? If no, indicate you provide services valued in excess of broadcasting stations, commercial building | 100 to customers in your State who purchase the value of any such services you proof \$50,000 to public utilities, transit system | sed goods ovided. is, erns? If | 0 |
| \$ B. If you answered no to 9A, did you p valued in excess of \$50,000 from dir \$ C. If you answered no to 9A and 9B, did newspapers, health care institutions, less than \$50,000, indicate amount. D. Did you sell goods valued in excess amount. \$ | rovide services valued in excess of \$50,0 rectly outside your State? If no, indicate I you provide services valued in excess o broadcasting stations, commercial buildin \$ of \$50,000 directly to customers located of \$50,000 directly to \$50, | 100 to customers in your State who purchast the value of any such services you proof \$50,000 to public utilities, transit system ags, educational institutions, or retail concountside your State? If less than \$50,000, in | sed goods ovided. is, erns? If | 0 |
| \$ B. If you answered no to 9A, did you p valued in excess of \$50,000 from dir \$ C. If you answered no to 9A and 9B, did newspapers, health care institutions, less than \$50,000, indicate amount. D. Did you sell goods valued in excess amount. \$ E. If you answered no to 9D, did you sell. | rovide services valued in excess of \$50,0 rectly outside your State? If no, indicate I you provide services valued in excess o broadcasting stations, commercial buildin \$ of \$50,000 directly to customers located cell goods valued in excess of \$50,000 directly to customers. | 100 to customers in your State who purchase the value of any such services you proof \$50,000 to public utilities, transit systemings, educational institutions, or retail conceputside your State? If less than \$50,000, in eactly to customers located inside your State | sed goods ovided. is, erns? If idicate e who | 0 |
| \$ B. If you answered no to 9A, did you p valued in excess of \$50,000 from dir \$ C. If you answered no to 9A and 9B, did newspapers, health care institutions, less than \$50,000, indicate amount. D. Did you sell goods valued in excess amount. \$ E. If you answered no to 9D, did you sell. | rovide services valued in excess of \$50,0 rectly outside your State? If no, indicate I you provide services valued in excess o broadcasting stations, commercial buildin \$ of \$50,000 directly to customers located cell goods valued in excess of \$50,000 directly to customers. | 100 to customers in your State who purchast the value of any such services you proof \$50,000 to public utilities, transit system ags, educational institutions, or retail concountside your State? If less than \$50,000, in | sed goods ovided. is, erns? If idicate e who | 0 |
| \$ B. If you answered no to 9A, did you p valued in excess of \$50,000 from dir \$ C. If you answered no to 9A and 9B, did newspapers, health care institutions, less than \$50,000, indicate amount. D. Did you sell goods valued in excess amount. \$ E. If you answered no to 9D, did you sell purchased other goods valued in excess amount. \$ F. Did you purchase and receive goods. | rovide services valued in excess of \$50,0 rectly outside your State? If no, indicate by a lyou provide services valued in excess of broadcasting stations, commercial building of \$50,000 directly to customers located on the state of \$50,000 directly to customers of \$50,000 directly outside your ess of \$50,000 from directly outside your | 100 to customers in your State who purchase the value of any such services you proof \$50,000 to public utilities, transit systemings, educational institutions, or retail conceputside your State? If less than \$50,000, in eactly to customers located inside your State | sed goods ovided. ss, erns? If idicate e who ount. | |
| \$ B. If you answered no to 9A, did you p valued in excess of \$50,000 from did \$ C. If you answered no to 9A and 9B, did newspapers, health care institutions, less than \$50,000, indicate amount. D. Did you sell goods valued in excess amount. \$ E. If you answered no to 9D, did you sell purchased other goods valued in excess amount. \$ F. Did you purchase and receive good amount. \$ | rovide services valued in excess of \$50,0 rectly outside your State? If no, indicate by a lyou provide services valued in excess of broadcasting stations, commercial building of \$50,000 directly to customers located ell goods valued in excess of \$50,000 directly outside your ls valued in excess of \$50,000 from directly outside your ls valued in excess of \$50,000 from directly outside your | on to customers in your State who purchase the value of any such services you proof \$50,000 to public utilities, transit systemings, educational institutions, or retail conceptutside your State? If less than \$50,000, in each of the state? If less than \$50,000, indicate amount of the state? If less than \$50,000, indicate amount of the state? If less than \$50,000 to public utilities, transit system and the state? If less than \$50,000, indicate amount of the state? If less than \$50,000 to public utilities, transit system are the state. | sed goods ovided. ss, erns? If idicate e who ount. 00, indicate | |
| \$ B. If you answered no to 9A, did you p valued in excess of \$50,000 from dir \$ C. If you answered no to 9A and 9B, did newspapers, health care institutions, less than \$50,000, indicate amount. D. Did you sell goods valued in excess amount. \$ E. If you answered no to 9D, did you sell purchased other goods valued in excess amount. \$ F. Did you purchase and receive good amount. \$ G. Did you purchase and receive good amount. | rovide services valued in excess of \$50,0 rectly outside your State? If no, indicate by your provide services valued in excess of broadcasting stations, commercial building for \$50,000 directly to customers located by the state of \$50,000 directly to customers located by the state of \$50,000 from directly outside your last valued in excess of \$50,000 from directly state | on to customers in your State who purchase the value of any such services you proof \$50,000 to public utilities, transit systemings, educational institutions, or retail conceptutside your State? If less than \$50,000, in each to customers located inside your State State? If less than \$50,000, indicate amount of the customers located inside your State State? If less than \$50,000, indicate amount of the customers located inside your State State? If less than \$50,000, indicate amount of the customers located inside your State State? | sed goods ovided. ss, erns? If idicate e who ount. 00, indicate | |
| \$ B. If you answered no to 9A, did you p valued in excess of \$50,000 from did \$ C. If you answered no to 9A and 9B, did newspapers, health care institutions, less than \$50,000, indicate amount. D. Did you sell goods valued in excess amount. \$ E. If you answered no to 9D, did you sell goods valued in excess amount. \$ F. Did you purchase and receive good amount. \$ G. Did you purchase and receive good outside your State? If less than \$5 | rovide services valued in excess of \$50,0 rectly outside your State? If no, indicate I you provide services valued in excess of broadcasting stations, commercial building of \$50,000 directly to customers located ell goods valued in excess of \$50,000 directly outside your ls valued in excess of \$50,000 from directly also valued in excess of \$50,000 from directly outside your ls valued in excess of \$50,000 from directly outside your ls valued in excess of \$50,000 from directly outside your ls valued in excess of \$50,000 from enter 0,000, indicate amount. \$ | the value of any such services you prof \$50,000 to public utilities, transit system ngs, educational institutions, or retail conceputside your State? If less than \$50,000, in eactly to customers located inside your State State? If less than \$50,000, indicate amount of the state of the state? If less than \$50,000 indicate amount of the state? | sed goods ovided. ss, erns? If idicate e who ount. 00, indicate | |
| B. If you answered no to 9A, did you p valued in excess of \$50,000 from did \$ C. If you answered no to 9A and 9B, did newspapers, health care institutions, less than \$50,000, indicate amount. D. Did you sell goods valued in excess amount. \$ E. If you answered no to 9D, did you see purchased other goods valued in excess amount. \$ F. Did you purchase and receive good amount. \$ G. Did you purchase and receive good outside your State? If less than \$50,000 from did you purchase and receive good outside your State? If less than \$50,000 from did you purchase and receive good outside your State? If less than \$50,000 from did you purchase and receive good outside your State? If less than \$50,000 from did you purchase and receive good outside your State? If less than \$50,000 from did you purchase and receive good outside your State? If less than \$50,000 from did you purchase and receive good outside your State? If less than \$50,000 from did you purchase and receive good outside your State? If less than \$50,000 from did you purchase and receive good outside your State? If less than \$50,000 from did you purchase and receive good outside your State? If less than \$50,000 from did you purchase and receive good outside your State? | rovide services valued in excess of \$50,0 rectly outside your State? If no, indicate by your provide services valued in excess of broadcasting stations, commercial building for \$50,000 directly to customers located by the state of \$50,000 directly to customers located by the state of \$50,000 from directly outside your last valued in excess of \$50,000 from directly state | 100 to customers in your State who purchast the value of any such services you proof \$50,000 to public utilities, transit systemings, educational institutions, or retail conceptutside your State? If less than \$50,000, in eactly to customers located inside your State State? If less than \$50,000, indicate amountly outside your State? If less than \$50,000 prises who received the goods directly from the standard of | sed goods ovided. ss, erns? If idicate e who ount. 00, indicate | |
| \$ B. If you answered no to 9A, did you p valued in excess of \$50,000 from dir \$ C. If you answered no to 9A and 9B, did newspapers, health care institutions, less than \$50,000, indicate amount. D. Did you sell goods valued in excess amount. \$ E. If you answered no to 9D, did you se purchased other goods valued in excess \$ F. Did you purchase and receive good amount. \$ G. Did you purchase and receive good outside your State? If less than \$5 H. Gross Revenues from all sales or purchase and sales or purchase and sales or purchase good outside your State? [] \$100,000 [] \$250,000 [] \$5 | rovide services valued in excess of \$50,0 rectly outside your State? If no, indicate I you provide services valued in excess of broadcasting stations, commercial building of \$50,000 directly to customers located ell goods valued in excess of \$50,000 directly outside your ls valued in excess of \$50,000 from directly outside your ls valued in excess of \$50,000 from enter 0,000, indicate amount. \$ performance of services (Check the largest provided in excess of \$50,000 from enter 10,000, indicate amount. | the value of any such services you prof \$50,000 to public utilities, transit system ngs, educational institutions, or retail conceptuside your State? If less than \$50,000, in early to customers located inside your State State? If less than \$50,000, indicate amountly outside your State? If less than \$50,000 prises who received the goods directly from stamount): In \$100,000, indicate amount. | sed goods ovided. ss, erns? If idicate e who ount. 00, indicate | |
| \$ B. If you answered no to 9A, did you p valued in excess of \$50,000 from dir \$ C. If you answered no to 9A and 9B, did newspapers, health care institutions, less than \$50,000, indicate amount. D. Did you sell goods valued in excess amount. \$ E. If you answered no to 9D, did you set purchased other goods valued in excess \$ F. Did you purchase and receive good amount. \$ G. Did you purchase and receive good outside your State? If less than \$5 | rovide services valued in excess of \$50,00 rectly outside your State? If no, indicate a lyou provide services valued in excess of broadcasting stations, commercial building of \$50,000 directly to customers located and the large of \$50,000 from directly outside your large valued in excess of \$50,000 from directly outside your large valued in excess of \$50,000 from directly valued in excess of \$50,000 from directly valued in excess of \$50,000 from enter 0,000, indicate amount. \$ Serformance of services (Check the larges of \$00,000 [] \$1,000,000 or more If less that the last 12 months? If yes, specify dates | the value of any such services you prof \$50,000 to public utilities, transit system ngs, educational institutions, or retail conceptuside your State? If less than \$50,000, in early to customers located inside your State. State? If less than \$50,000, indicate amoutly outside your State? If less than \$50,000 prises who received the goods directly from \$100,000, indicate amount. | sed goods ovided. is, erns? If idicate e who ount. 00, indicate m points | |
| B. If you answered no to 9A, did you p valued in excess of \$50,000 from did \$ C. If you answered no to 9A and 9B, did newspapers, health care institutions, less than \$50,000, indicate amount. D. Did you sell goods valued in excess amount. \$ E. If you answered no to 9D, did you sell goods valued in excess amount. \$ F. Did you purchase and receive good amount. \$ G. Did you purchase and receive good outside your State? If less than \$5 H. Gross Revenues from all sales or present the service of the service good outside your State? If less than \$5 I. Did you begin operations within the service good outside your State? If less than \$5 I. Did you begin operations within the service good outside your State? If less than \$5 | rovide services valued in excess of \$50,00 rectly outside your State? If no, indicate a lyou provide services valued in excess of broadcasting stations, commercial building of \$50,000 directly to customers located and the last 12 months? If yes, specify date of the last 12 months? | the value of any such services you prof \$50,000 to public utilities, transit system ngs, educational institutions, or retail conceptuside your State? If less than \$50,000, in early to customers located inside your State State? If less than \$50,000, indicate amountly outside your State? If less than \$50,000 prises who received the goods directly from stamount): In \$100,000, indicate amount. | sed goods ovided. is, erns? If idicate e who ount. 00, indicate m points | |
| B. If you answered no to 9A, did you p valued in excess of \$50,000 from did \$\$ C. If you answered no to 9A and 9B, did newspapers, health care institutions, less than \$50,000, indicate amount. D. Did you sell goods valued in excess amount. \$\$ E. If you answered no to 9D, did you see purchased other goods valued in excess amount. \$\$ F. Did you purchase and receive good amount. \$\$ G. Did you purchase and receive good amount. \$\$ H. Gross Revenues from all sales or provided your State? If less than \$50.000 [] | rovide services valued in excess of \$50,00 rectly outside your State? If no, indicate a lyou provide services valued in excess of broadcasting stations, commercial building of \$50,000 directly to customers located and the last of \$50,000 directly to customers located and the last 12 months? If yes, specify date of the last 12 months? If yes, specify date of address of association or group). | f \$50,000 to public utilities, transit system ngs, educational institutions, or retail conceputside your State? If less than \$50,000, in eactly to customers located inside your State? If less than \$50,000, indicate amount your state? If less than \$50,000 indicate amount your state? | sed goods ovided. is, erns? If idicate e who ount. 00, indicate m points | |
| B. If you answered no to 9A, did you p valued in excess of \$50,000 from did \$\$ C. If you answered no to 9A and 9B, did newspapers, health care institutions, less than \$50,000, indicate amount. D. Did you sell goods valued in excess amount. \$\$ E. If you answered no to 9D, did you see purchased other goods valued in excess amount. \$\$ F. Did you purchase and receive good amount. \$\$ G. Did you purchase and receive good amount. \$\$ H. Gross Revenues from all sales or provided your State? If less than \$50.000 [] | rovide services valued in excess of \$50,00 rectly outside your State? If no, indicate a lyou provide services valued in excess of broadcasting stations, commercial building of \$50,000 directly to customers located and the last of \$50,000 directly to customers located and the last 12 months? If yes, specify date the last 12 months? If yes, specify date of address of association or group). | f \$50,000 to public utilities, transit system ngs, educational institutions, or retail conceputside your State? If less than \$50,000, in eactly to customers located inside your State? If less than \$50,000, indicate amount your state? If less than \$50,000 indicate amount your state? | sed goods ovided. is, erns? If idicate e who ount. 00, indicate m points | |
| B. If you answered no to 9A, did you p valued in excess of \$50,000 from dir \$ C. If you answered no to 9A and 9B, did newspapers, health care institutions, less than \$50,000, indicate amount. D. Did you sell goods valued in excess amount. \$ E. If you answered no to 9D, did you see purchased other goods valued in excess \$ F. Did you purchase and receive good amount. \$ G. Did you purchase and receive good outside your State? If less than \$5 H. Gross Revenues from all sales or \$\big[] \$100,000 [] \$250,000 [] \$5 I. Did you begin operations within to ARE YOU A MEMBER OF AN ASSOTE [] YES [] NO (If yes, name and to the pool of th | rovide services valued in excess of \$50,00 rectly outside your State? If no, indicate a lyou provide services valued in excess of broadcasting stations, commercial building of \$50,000 directly to customers located and the last of \$50,000 directly to customers located and the last 12 months? If yes, specify date the last 12 months? If yes, specify date of address of association or group). | the value of any such services you pro f \$50,000 to public utilities, transit system ngs, educational institutions, or retail conce putside your State? If less than \$50,000, in ectly to customers located inside your State State? If less than \$50,000, indicate amount thy outside your State? If less than \$50,000 prises who received the goods directly from st amount): un \$100,000, indicate amount. ELECTIVE B. ABOUT YOUR OPERATIONS | sed goods ovided. is, erns? If idicate e who ount. 00, indicate m points ARGAINING? | |
| \$ B. If you answered no to 9A, did you p valued in excess of \$50,000 from dir \$ C. If you answered no to 9A and 9B, did newspapers, health care institutions, less than \$50,000, indicate amount. D. Did you sell goods valued in excess amount. \$ E. If you answered no to 9D, did you sell purchased other goods valued in excess amount. \$ F. Did you purchase and receive good amount. \$ G. Did you purchase and receive good outside your State? If less than \$5 H. Gross Revenues from all sales or provided the selection of | rovide services valued in excess of \$50,00 rectly outside your State? If no, indicate a lyou provide services valued in excess of broadcasting stations, commercial building of \$50,000 directly to customers located and the last of \$50,000 from directly outside your less of \$50,000 from directly outside your less valued in excess of \$50,000 from directly outside your less valued in excess of \$50,000 from enter 0,000, indicate amount. \$ | on to customers in your State who purchase the value of any such services you professor on the value of any such services you professor of \$50,000 to public utilities, transit systemings, educational institutions, or retail concentration of the customers located inside your State (and the state) of the state (and the state) of the state (but in the | sed goods ovided. is, erns? If idicate e who ount. io, indicate m points ARGAINING? | |
| B. If you answered no to 9A, did you p valued in excess of \$50,000 from dir \$ C. If you answered no to 9A and 9B, did newspapers, health care institutions, less than \$50,000, indicate amount. D. Did you sell goods valued in excess amount. \$ E. If you answered no to 9D, did you see purchased other goods valued in excess amount. \$ F. Did you purchase and receive good amount. \$ G. Did you purchase and receive good outside your State? If less than \$5 H. Gross Revenues from all sales or provided the second of the second points of the second points of the second points. I. Did you begin operations within the second points of the second points of the second points. The second points of the second points of the second points of the second points of the second points. The second points of the secon | rovide services valued in excess of \$50,00 rectly outside your State? If no, indicate a lyou provide services valued in excess of broadcasting stations, commercial building of \$50,000 directly to customers located and the last of \$50,000 from directly outside your less of \$50,000 from directly outside your less valued in excess of \$50,000 from directly outside your less valued in excess of \$50,000 from enter 0,000, indicate amount. \$ | the value of any such services you pro f \$50,000 to public utilities, transit system ngs, educational institutions, or retail conce putside your State? If less than \$50,000, in ectly to customers located inside your State State? If less than \$50,000, indicate amount thy outside your State? If less than \$50,000 prises who received the goods directly from st amount): un \$100,000, indicate amount. ELECTIVE B. ABOUT YOUR OPERATIONS | sed goods ovided. is, erns? If idicate e who ount. io, indicate m points ARGAINING? | |
| \$ B. If you answered no to 9A, did you p valued in excess of \$50,000 from dir \$ C. If you answered no to 9A and 9B, did newspapers, health care institutions, less than \$50,000, indicate amount. D. Did you sell goods valued in excess amount. \$ E. If you answered no to 9D, did you sell purchased other goods valued in excess amount. \$ F. Did you purchase and receive good amount. \$ G. Did you purchase and receive good outside your State? If less than \$5 H. Gross Revenues from all sales or provided the selection of | rovide services valued in excess of \$50,00 rectly outside your State? If no, indicate a lyou provide services valued in excess of broadcasting stations, commercial building of \$50,000 directly to customers located and the last of \$50,000 directly to customers located and the last of \$50,000 from directly outside your last valued in excess of \$50,000 from directly outside your last valued in excess of \$50,000 from directly outside your last valued in excess of \$50,000 from enter 0,000, indicate amount. Selector of services (Check the largest 12 months? If yes, specify dates the last 12 months? If yes, specify dates the last 12 months? If yes, specify dates the last 12 months? If yes, specify dates address of association or group). ED TO GIVE FURTHER INFORMATION TITLE E-I | on to customers in your State who purchase the value of any such services you proof \$50,000 to public utilities, transit systemings, educational institutions, or retail concentration of the customers located inside your State. The state of the customers located inside your State. If less than \$50,000, indicate amount your state? If less than \$50,000, indicate amount with your state. If less than \$50,000 prises who received the goods directly from the stamount. Stamount: STABOUT YOUR OPERATIONS MAIL ADDRESS MPLETING THIS QUESTIONNAII | sed goods ovided. is, erns? If idicate e who ount. io, indicate m points ARGAINING? TEL. NUMBER | |

PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and/or unfair labor practice proceedings and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary. However, failure to supply the information may cause the NLRB to refuse to process any further a representation or unfair labor practice case, or may cause the NLRB to issue you a subpoena and seek enforcement of the subpoena in federal court.



UNITED STATES GOVERNMENT NATIONAL LABOR RELATIONS BOARD



Agency Website: www.nlrb.gov Telephone: (510)637-3300 Fax: (510)637-3315 Download NLRB Mobile App

August 28, 2020

United Farm Workers of America 29700 Woodford-Tehachapi Road P.O. Box 62 Keene CA 93531-0062

REGION 32

1301 Clay St Ste 300N

Oakland, CA 94612-5224

Re: Foster Poultry Farms Case 32-CA-265370

Dear Sir or Madam:

The charge that you filed in this case on August 27, 2020 has been docketed as case number 32-CA-265370. This letter tells you how to contact the Board agent who will be investigating the charge, explains your right to be represented, discusses presenting your evidence, and provides a brief explanation of our procedures, including how to submit documents to the NLRB.

<u>Investigator</u>: This charge is being investigated by Field Examiner STEPHEN M. SLOPER whose telephone number is (510)671-3045. If this Board agent is not available, you may contact Acting Assistant to the Regional Director HOKULANI VALENCIA whose telephone number is (510)671-3047.

Right to Representation: You have the right to be represented by an attorney or other representative in any proceeding before us. If you choose to be represented, your representative must notify us in writing of this fact as soon as possible by completing *Form NLRB-4701*, *Notice of Appearance*. This form is available on our website, www.nlrb.gov, or from an NLRB office upon your request.

If you are contacted by someone about representing you in this case, please be assured that no organization or person seeking your business has any "inside knowledge" or favored relationship with the National Labor Relations Board. Their knowledge regarding this proceeding was only obtained through access to information that must be made available to any member of the public under the Freedom of Information Act.

<u>Presentation of Your Evidence</u>: As the party who filed the charge in this case, it is your responsibility to meet with the Board agent to provide a sworn affidavit, or provide other witnesses to provide sworn affidavits, and to provide relevant documents within your possession. Because we seek to resolve labor disputes promptly, you should be ready to promptly present your affidavit(s) and other evidence. If you have not yet scheduled a date and time for the Board agent to take your affidavit, please contact the Board agent to schedule the affidavit(s). If you fail to cooperate in promptly presenting your evidence, your charge may be dismissed without investigation.

<u>Preservation of all Potential Evidence:</u> Please be mindful of your obligation to preserve all relevant documents and electronically stored information (ESI) in this case, and to take all steps necessary to avoid the inadvertent loss of information in your possession, custody or control. Relevant information includes, but is not limited to, paper documents and all ESI (e.g. SMS text messages, electronic documents, emails, and any data created by proprietary software tools) related to the above-captioned case.

Prohibition on Recording Affidavit Interviews: It is the policy of the General Counsel to prohibit affiants from recording the interview conducted by Board agents when subscribing Agency affidavits. Such recordings may impede the Agency's ability to safeguard the confidentiality of the affidavit itself, protect the privacy of the affiant and potentially compromise the integrity of the Region's investigation.

Correspondence: All documents submitted to the Region regarding your case MUST be filed through the Agency's website, www.nlrb.gov. This includes all formal pleadings, briefs, as well as affidavits, documentary evidence, and position statements. The Agency requests all evidence submitted electronically to be in the form it is normally used and maintained in the course of business (i.e., native format). Where evidence submitted electronically is not in native format, it should be submitted in a manner that retains the essential functionality of the native format (i.e., in a machine-readable and searchable electronic format).

If you have questions about the submission of evidence or expect to deliver a large quantity of electronic records, please promptly contact the Board agent investigating the charge. If you cannot e-file your documents, you must provide a statement explaining why you do not have access to the means for filing electronically or why filing electronically would impose an undue burden.

In addition, this Region will be issuing case-related correspondence and documents, including complaints, compliance specifications, dismissal letters, deferral letters, and withdrawal letters, electronically to the email address you provide. Please ensure that you receive important case-related correspondence, please ensure that the Board Agent assigned to your case has your preferred email address. These steps will ensure that you receive correspondence faster and at a significantly lower cost to the taxpayer. If there is some reason you are unable to receive correspondence via email, please contact the agent assigned to your case to discuss the circumstances that prevent you from using email.

Information about the Agency, the procedures we follow in unfair labor practice cases and our customer service standards is available on our website, www.nlrb.gov or from an NLRB office upon your request. NLRB Form 4541, Investigative Procedures offers information that is helpful to parties involved in an investigation of an unfair labor practice charge.

We can provide assistance for persons with limited English proficiency or disability. Please let us know if you or any of your witnesses would like such assistance.

Very truly yours,

VALERIE HARDY-MAHONEY

Regional Director

cc: Aida L. Sotelo, Legal Assistant Farm Worker Law P.O. Box 1998 Bakersfield CA 93303

NATIONAL LABOR RELATIONS BOARD

NOTICE OF APPEARANCE

| | - |
|--|--|
| Foster Poultry Farms | |
| and | CASE 32-CA-265370 |
| | |
| United Farm Workers of America | |
| REGIONAL DIRECTOR EXECUTIVE SECRETARY NATIONAL LABOR RELATIONS BOARD Washington, DC 20570 | GENERAL COUNSEL NATIONAL LABOR RELATIONS BOARD Washington, DC 20570 |
| THE UNDERSIGNED HEREBY ENTERS APPEARANCE AS REPRESENTAT | TIVE OF |
| | |
| IN THE ABOVE-CAPTIONED MATTER. | |
| CHECK THE APPROPRIATE BOX(ES) BELOW: REPRESENTATIVE IS AN ATTORNEY IF REPRESENTATIVE IS AN ATTORNEY, IN ORDER TO ENSURE CERTAIN DOCUMENTS OR CORRESPONDENCE FROM THE AGENCY IN BOX MUST BE CHECKED. IF THIS BOX IS NOT CHECKED, THE PARTY V DOCUMENTS SUCH AS CHARGES, PETITIONS AND FORMAL DOCUMEN CASEHANDLING MANUAL. (REPRESENTATIVE INFOR. | ADDITION TO THOSE DESCRIBED BELOW, THIS VILL RECEIVE ONLY COPIES OF CERTAIN' ITS AS DESCRIBED IN SEC. 11842.3 OF THE |
| NAME: Nick C. Geannacopulos and Jennifer L. Mora | |
| MAILING ADDRESS: SEYFARTH SHAW LLP, 560 Mission Street, 3 | Ust Floor, San Francisco, California 04105 |
| MAILING ADDRESS: SEIFANIR SRAW LLP, JOU WISSION STREET, 3 | 18t Ploof, San Francisco, Camornia 94103 |
| E-MAIL ADDRESS: ngeannacopulos@seyfarth.com/jmora@seyfarth. | com |
| OFFICE TELEPHONE NUMBER: (415) 397-2823 / (415) 732-1146 | |
| CELL PHONE NUMBER: | FAX: (415) 397-8549 |
| SIGNATURE:/s/ Jennifer L. Mora (Please sign in ink.) DATE: September 1, 2020 | |
| | |

American LegalNet, Inc. www.USCourtForms.com

¹ IF CASE IS PENDING IN WASHINGTON AND NOTICE OF APPEARANCE IS SENT TO THE GENERAL COUNSEL OR THE EXECUTIVE SECRETARY, A COPY SHOULD BE SENT TO THE REGIONAL DIRECTOR OF THE REGION IN WHICH THE CASE WAS FILED SO THAT THOSE RECORDS WILL REFLECT THE APPEARANCE.

FORM NLRB-501 (2-18)

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST EMPLOYER

DO NOT WRITE IN THIS SPACE

Case Date Filed

32-CA-266430

Date Filed 09/18/2020

INSTRUCTIONS:

| File an original with NLRB Regional Director for the region in 1, EMPL | OYER AGAINST WHOM CHARGE IS BROUGHT | |
|--|---|--|
| a. Name of Employer FOSTER POULTRY FARMS | | b. Tel. No. 209-394-7901 |
| | | c. Cell No. |
| | | f. Fax. No. |
| d. Address (Street, city, state, and ZIP code) | e. Employer Representative | g. e-mail |
| 843 Davis Street PO Box 457 | Maria Silveira, Human Resources | maria.silveira@fosterfarms.com |
| Livingston, CA 95334 | | h. Number of workers employed 2,700 |
| i. Type of Establishment (factory, mine, wholesaler, etc.) Poultry Processing | j. Identify principal product or service Poultry Processing | |
| The above-named employer has engaged in and is engage | ging in unfair labor practices within the meaning of s | ection 8(a), subsections (1) and |
| (list subsections) 8(a)(1) and 8(a)(5) | | abor Relations Act, and thest unfair labor |
| practices are practices affecting commerce within the me | aning of the Act, or these unfair labor practices affect | ting commerce within the meaning of |
| the Act and the Postal Reorganization Act. | | |
| 2. Basis of the Charge (set forth a clear and concise state | ement of the facts constituting the alleged unfair labor | or practices) |
| meetings. This conduct demonstrates bad faith bar 3. Full name of party filing charge (if labor organization, g United Farm Workers of America ("UFW") | | |
| 4a. Address (Street and number, city, state, and ZIP code 29700 Woodford-Tehachapi Road | e) | 4b. Tel. No. 661-859-1174 |
| P.O. Box 62 Keene, CA 93531 | | 4c. Cell No. |
| | | 4d. Fax No. |
| | | 4e. e-mail |
| 5. Full name of national or international labor organization | | |
| United Farm Workers of America ("UFW") | n of which it is an affiliate or constituent unit (to be fil | led in when charge is filed by a labor organization) |
| 6. DECL | ARATION ove charge and that the statements | Tel. No. 661-859-1174 |
| 6. DECL | ARATION | Tel. No. |
| 6. DECL | ARATION ove charge and that the statements my knowledge and belief. | Tel. No. 661-859-1174 |

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)
PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing unfair labor practice and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information may cause the NLRB to decline to invoke its processes.



UNITED STATES GOVERNMENT NATIONAL LABOR RELATIONS BOARD



REGION 32 1301 Clay St Ste 300N Oakland, CA 94612-5224 Agency Website: www.nlrb.gov Telephone: (510)637-3300 Fax: (510)637-3315 Download NLRB Mobile App

September 22, 2020

Maria Silveira, Human Resources Foster Poultry Farms 843 Davis Street PO Box 457 Livingston CA 95334-1525

> Re: Foster Poultry Farms Case 32-CA-266430

Dear Ms. Silveira:

Enclosed is a copy of a charge that has been filed in this case. This letter tells you how to contact the Board agent who will be investigating the charge, explains your right to be represented, discusses presenting your evidence, and provides a brief explanation of our procedures, including how to submit documents to the NLRB.

<u>Investigator</u>: This charge is being investigated by Field Examiner STEPHEN M. SLOPER whose telephone number is (510)671-3045. If this Board agent is not available, you may contact Acting Assistant to the Regional Director HOKULANI VALENCIA whose telephone number is (510)671-3047.

Right to Representation: You have the right to be represented by an attorney or other representative in any proceeding before us. If you choose to be represented, your representative must notify us in writing of this fact as soon as possible by completing *Form NLRB-4701*, *Notice of Appearance*. This form is available on our website, www.nlrb.gov, or from an NLRB office upon your request.

If you are contacted by someone about representing you in this case, please be assured that no organization or person seeking your business has any "inside knowledge" or favored relationship with the National Labor Relations Board. Their knowledge regarding this proceeding was only obtained through access to information that must be made available to any member of the public under the Freedom of Information Act.

Presentation of Your Evidence: We seek prompt resolutions of labor disputes. Therefore, I urge you or your representative to submit a complete written account of the facts and a statement of your position with respect to the allegations set forth in the charge as soon as possible. If the Board agent later asks for more evidence, I strongly urge you or your representative to cooperate fully by promptly presenting all evidence relevant to the investigation. In this way, the case can be fully investigated more quickly.

Full and complete cooperation includes providing witnesses to give sworn affidavits to a Board agent, and providing all relevant documentary evidence requested by the Board agent. Sending us your written account of the facts and a statement of your position is not enough to be considered full and complete cooperation. A refusal to fully cooperate during the investigation might cause a case to be litigated unnecessarily.

In addition, either you or your representative must complete the enclosed Commerce Questionnaire to enable us to determine whether the NLRB has jurisdiction over this dispute. If you recently submitted this information in another case, or if you need assistance completing the form, please contact the Board agent.

We will not honor requests to limit our use of position statements or evidence. Specifically, any material you submit may be introduced as evidence at a hearing before an administrative law judge regardless of claims of confidentiality. However, certain evidence produced at a hearing may be protected from public disclosure by demonstrated claims of confidentiality.

Further, the Freedom of Information Act may require that we disclose position statements or evidence in closed cases upon request, unless an exemption applies, such as those protecting confidential financial information or personal privacy interests.

<u>Preservation of all Potential Evidence:</u> Please be mindful of your obligation to preserve all relevant documents and electronically stored information (ESI) in this case, and to take all steps necessary to avoid the inadvertent loss of information in your possession, custody or control. Relevant information includes, but is not limited to, paper documents and all ESI (e.g. SMS text messages, electronic documents, emails, and any data created by proprietary software tools) related to the above-captioned case.

<u>Prohibition on Recording Affidavit Interviews:</u> It is the policy of the General Counsel to prohibit affiants from recording the interview conducted by Board agents when subscribing Agency affidavits. Such recordings may impede the Agency's ability to safeguard the confidentiality of the affidavit itself, protect the privacy of the affiant and potentially compromise the integrity of the Region's investigation.

<u>Correspondence</u>: All documents submitted to the Region regarding your case MUST be filed through the Agency's website, <u>www.nlrb.gov</u>. This includes all formal pleadings, briefs, as well as affidavits, documentary evidence, and position statements. The Agency requests all evidence submitted electronically to be in the form it is normally used and maintained in the course of business (i.e., native format). Where evidence submitted electronically is not in native format, it should be submitted in a manner that retains the essential functionality of the native format (i.e., in a machine-readable and searchable electronic format).

If you have questions about the submission of evidence or expect to deliver a large quantity of electronic records, please promptly contact the Board agent investigating the charge. If you cannot e-file your documents, you must provide a statement explaining why you do not

have access to the means for filing electronically or why filing electronically would impose an undue burden.

In addition, this Region will be issuing case-related correspondence and documents, including complaints, compliance specifications, dismissal letters, deferral letters, and withdrawal letters, electronically to the email address you provide. Please ensure that you receive important case-related correspondence, please ensure that the Board Agent assigned to your case has your preferred email address. These steps will ensure that you receive correspondence faster and at a significantly lower cost to the taxpayer. If there is some reason you are unable to receive correspondence via email, please contact the agent assigned to your case to discuss the circumstances that prevent you from using email.

Information about the Agency, the procedures we follow in unfair labor practice cases and our customer service standards is available on our website, www.nlrb.gov or from an NLRB office upon your request. NLRB Form 4541, Investigative Procedures offers information that is helpful to parties involved in an investigation of an unfair labor practice charge.

We can provide assistance for persons with limited English proficiency or disability. Please let us know if you or any of your witnesses would like such assistance.

Very truly yours,

VALERIE HARDY-MAHONEY Regional Director

Enclosures:

- 1. Copy of Charge
- 2. Commerce Questionnaire

| Reviseu 3/21/2011 | Revised 3/21/2011 NATIONAL LABOR RELATIONS BOARD | | | |
|---|--|---|--|-------|
| QUESTIONNAIRE ON COMMERCE INFORMATION | | | | |
| Please read carefully, answer all applicable ite | ms, and return to the NLRB Office. If additiona | al space is required, please add a page and i | dentify item number. | |
| CASE NAME | | CAS | SE NUMBER | |
| | | 32- | -CA-266430 | |
| 1. EXACT LEGAL TITLE OF ENTITY (| As filed with State and/or stated in legal de | ocuments forming entity) | | |
| | | | | |
| 2. TYPE OF ENTITY | | | | |
| [] CORPORATION [] LLC [] L | LP [] PARTNERSHIP [] SOLE I | PROPRIETORSHIP [] OTHER (Spe | cify) | |
| 3. IF A CORPORATION or LLC | El [] I/M/I/EKSIM [] SOLE I | TROTRIETOROIM [] OTHER (Spe | eny) | |
| A. STATE OF INCORPORATION | B. NAME, ADDRESS, AND RELATION | SHIP (e.g. parent, subsidiary) OF ALL RE | LATED ENTITIES | |
| OR FORMATION | | | | |
| 4. IF AN LLC OR ANY TYPE OF PART | NERSHIP FILL NAME AND ADDRES | S OF ALL MEMBERS OR PARTNERS | 1 | |
| 4. If AN ELECONANT THE OF TAKE | TVERSIII, FOLD WANTE WAY WORKES | S OF REE MEMBERS ON FRANCES | , | |
| | | | | |
| 5. IF A SOLE PROPRIETORSHIP, FUL | LL NAME AND ADDRESS OF PROPRIE | TOR | | |
| | | | | _ |
| 6. BRIEFLY DESCRIBE THE NATURE | COF YOUR OPERATIONS (Products hand | dled or manufactured, or nature of services | s performed). | |
| | | | | |
| 7. A. PRINCIPAL LOCATION: | B. BRANCH LOCA | ATIONS: | | |
| | | | | |
| 8. NUMBER OF PEOPLE PRESENTLY | EMPLOYED | | | |
| A. Total: | B. At the address involved in this ma | tter: | | |
| 9. DURING THE MOST RECENT (Chec | | 12 MONTHS or FISCAL YR | (FY dates |) |
| . Delling THE MOST RECEIVE (energy | in appropriate ood, Childhill III | 12 MONTHS OF FISCHE IN | Y | ES NO |
| | | | | |
| A. Did you provide services valued in | excess of \$50,000 directly to customers | outside your State? If no, indicate act | ual value. | |
| \$ | • | • | | |
| B. If you answered no to 9A, did you p | rovide services valued in excess of \$50 | ,000 to customers in your State who po | urchased goods | |
| B. If you answered no to 9A, did you p valued in excess of \$50,000 from dir | • | ,000 to customers in your State who po | urchased goods | |
| B. If you answered no to 9A, did you p valued in excess of \$50,000 from dir | rovide services valued in excess of \$50 rectly outside your State? If no, indicate | ,000 to customers in your State who pre the value of any such services yo | urchased goods u provided. | |
| \$ B. If you answered no to 9A, did you p valued in excess of \$50,000 from dir \$ C. If you answered no to 9A and 9B, did newspapers, health care institutions, | rovide services valued in excess of \$50 rectly outside your State? If no, indicate you provide services valued in excess broadcasting stations, commercial build | ,000 to customers in your State who pre the value of any such services yo of \$50,000 to public utilities, transit sy | urchased goods u provided. | |
| \$ B. If you answered no to 9A, did you p valued in excess of \$50,000 from dir \$ C. If you answered no to 9A and 9B, did newspapers, health care institutions, less than \$50,000, indicate amount. | rovide services valued in excess of \$50 rectly outside your State? If no, indicate you provide services valued in excess broadcasting stations, commercial build \$ | of \$50,000 to public utilities, transit sylings, educational institutions, or retail | urchased goods u provided. ystems, concerns? If | |
| \$ B. If you answered no to 9A, did you p valued in excess of \$50,000 from dir \$ C. If you answered no to 9A and 9B, did newspapers, health care institutions, less than \$50,000, indicate amount. D. Did you sell goods valued in excess | rovide services valued in excess of \$50 rectly outside your State? If no, indicate you provide services valued in excess broadcasting stations, commercial build \$ | of \$50,000 to public utilities, transit sylings, educational institutions, or retail | urchased goods u provided. ystems, concerns? If | |
| \$ B. If you answered no to 9A, did you p valued in excess of \$50,000 from dir \$ C. If you answered no to 9A and 9B, did newspapers, health care institutions, less than \$50,000, indicate amount. D. Did you sell goods valued in excess amount. \$ | rovide services valued in excess of \$50 rectly outside your State? If no, indicated you provide services valued in excess broadcasting stations, commercial build \$ of \$50,000 directly to customers located | ,000 to customers in your State who pre the value of any such services your of \$50,000 to public utilities, transit stranges, educational institutions, or retailed outside your State? If less than \$50,0 | urchased goods u provided. ystems, concerns? If | |
| \$ B. If you answered no to 9A, did you p valued in excess of \$50,000 from dir \$ C. If you answered no to 9A and 9B, did newspapers, health care institutions, less than \$50,000, indicate amount. D. Did you sell goods valued in excess amount. \$ E. If you answered no to 9D, did you sell | rovide services valued in excess of \$50 rectly outside your State? If no, indicated you provide services valued in excess broadcasting stations, commercial build \$ of \$50,000 directly to customers located all goods valued in excess of \$50,000 directly to customers. | ,000 to customers in your State who pre the value of any such services your of \$50,000 to public utilities, transit strange, educational institutions, or retailed outside your State? If less than \$50,000 rectly to customers located inside your | urchased goods u provided. ystems, concerns? If 00, indicate r State who | |
| \$ B. If you answered no to 9A, did you p valued in excess of \$50,000 from din \$ C. If you answered no to 9A and 9B, did newspapers, health care institutions, less than \$50,000, indicate amount. D. Did you sell goods valued in excess amount. \$ E. If you answered no to 9D, did you sepurchased other goods valued in excess \$ | rovide services valued in excess of \$50 rectly outside your State? If no, indicated you provide services valued in excess broadcasting stations, commercial build \$ of \$50,000 directly to customers located ell goods valued in excess of \$50,000 directly outside you | on,000 to customers in your State who presente the value of any such services your \$50,000 to public utilities, transit splings, educational institutions, or retailed outside your State? If less than \$50,000 rectly to customers located inside your State? If less than \$50,000, indicated | urchased goods u provided. ystems, concerns? If 000, indicate r State who e amount. | |
| \$ B. If you answered no to 9A, did you p valued in excess of \$50,000 from dir \$ C. If you answered no to 9A and 9B, did newspapers, health care institutions, less than \$50,000, indicate amount. D. Did you sell goods valued in excess amount. \$ E. If you answered no to 9D, did you sell purchased other goods valued in excess \$ F. Did you purchase and receive goods | rovide services valued in excess of \$50 rectly outside your State? If no, indicated you provide services valued in excess broadcasting stations, commercial build \$ of \$50,000 directly to customers located ell goods valued in excess of \$50,000 directly outside you | on,000 to customers in your State who presente the value of any such services your \$50,000 to public utilities, transit splings, educational institutions, or retailed outside your State? If less than \$50,000 rectly to customers located inside your State? If less than \$50,000, indicated | urchased goods u provided. ystems, concerns? If 000, indicate r State who e amount. | |
| \$ B. If you answered no to 9A, did you p valued in excess of \$50,000 from dir \$ C. If you answered no to 9A and 9B, did newspapers, health care institutions, less than \$50,000, indicate amount. D. Did you sell goods valued in excess amount. \$ E. If you answered no to 9D, did you sell purchased other goods valued in excess amount. \$ F. Did you purchase and receive good amount. \$ | rovide services valued in excess of \$50 rectly outside your State? If no, indicated you provide services valued in excess broadcasting stations, commercial build \$ of \$50,000 directly to customers located ell goods valued in excess of \$50,000 directly outside you also valued in excess of \$50,000 from directly outside you was valued in excess of \$50,000 from dire | on to customers in your State who presente the value of any such services your \$50,000 to public utilities, transit stanges, educational institutions, or retailed outside your State? If less than \$50,000 received to customers located inside your State? If less than \$50,000, indicated early outside your State? If less than \$50,000 are state? | urchased goods u provided. ystems, concerns? If 100, indicate r State who e amount. 150,000, indicate | |
| \$ B. If you answered no to 9A, did you p valued in excess of \$50,000 from dir \$ C. If you answered no to 9A and 9B, did newspapers, health care institutions, less than \$50,000, indicate amount. D. Did you sell goods valued in excess amount. \$ E. If you answered no to 9D, did you sell purchased other goods valued in excess amount. \$ F. Did you purchase and receive good amount. \$ G. Did you purchase and receive good. | rovide services valued in excess of \$50 rectly outside your State? If no, indicated you provide services valued in excess broadcasting stations, commercial build \$ of \$50,000 directly to customers located ell goods valued in excess of \$50,000 directly outside you list valued in excess of \$50,000 from directly outside you list valued in excess of \$50,000 from directly outside you list valued in excess of \$50,000 from directly outside you list valued in excess of \$50,000 from directly outside you list valued in excess of \$50,000 from directly outside you list valued in excess of \$50,000 from directly outside you list valued in excess of \$50,000 from directly outside you list valued in excess of \$50,000 from directly outside you list valued in excess of \$50,000 from entered in exc | on to customers in your State who presente the value of any such services your \$50,000 to public utilities, transit stanges, educational institutions, or retailed outside your State? If less than \$50,000 received to customers located inside your State? If less than \$50,000, indicated early outside your State? If less than \$50,000 are state? | urchased goods u provided. ystems, concerns? If 100, indicate r State who e amount. 150,000, indicate | |
| \$ B. If you answered no to 9A, did you p valued in excess of \$50,000 from dir \$ C. If you answered no to 9A and 9B, did newspapers, health care institutions, less than \$50,000, indicate amount. D. Did you sell goods valued in excess amount. \$ E. If you answered no to 9D, did you sell purchased other goods valued in excess amount. \$ F. Did you purchase and receive good amount. \$ | rovide services valued in excess of \$50 rectly outside your State? If no, indicated you provide services valued in excess broadcasting stations, commercial build \$ of \$50,000 directly to customers located ell goods valued in excess of \$50,000 directly outside you list valued in excess of \$50,000 from directly outside you list valued in excess of \$50,000 from directly outside you list valued in excess of \$50,000 from enter 0,000, indicate amount. \$ | of \$50,000 to public utilities, transit sylings, educational institutions, or retail doutside your State? If less than \$50,000 to customers located inside your state? If less than \$50,000 tractly to customers located inside your state? If less than \$50,000, indicated to customers located? If less than \$50,000 tractly outside your State? | urchased goods u provided. ystems, concerns? If 100, indicate r State who e amount. 150,000, indicate | |
| B. If you answered no to 9A, did you p valued in excess of \$50,000 from dir \$ C. If you answered no to 9A and 9B, did newspapers, health care institutions, less than \$50,000, indicate amount. D. Did you sell goods valued in excess amount. \$ E. If you answered no to 9D, did you sell purchased other goods valued in excess amount. \$ F. Did you purchase and receive good amount. \$ G. Did you purchase and receive good outside your State? If less than \$50,000 from directions are purchased of the purchase and receive good amount. \$ G. Did you purchase and receive good outside your State? If less than \$50,000 from directions are purchased of the purchase and receive good outside your State? If less than \$50,000 from directions are purchased in excess amount. | rovide services valued in excess of \$50 rectly outside your State? If no, indicated you provide services valued in excess broadcasting stations, commercial build \$ of \$50,000 directly to customers located ell goods valued in excess of \$50,000 directly outside you list valued in excess of \$50,000 from directly outside you list valued in excess of \$50,000 from directly outside you list valued in excess of \$50,000 from enter 0,000, indicate amount. \$ | of \$50,000 to public utilities, transit sylings, educational institutions, or retail doutside your State? If less than \$50,000 to customers located inside your ar State? If less than \$50,000, indicated to customers than \$50,000, indicated to customers are \$100,000 to customers located inside your ar State? If less than \$50,000, indicated to customers who received the goods directly customers who received the goods directly customers. | urchased goods u provided. ystems, concerns? If 100, indicate r State who e amount. 150,000, indicate | |
| \$ B. If you answered no to 9A, did you p valued in excess of \$50,000 from dir \$ C. If you answered no to 9A and 9B, did newspapers, health care institutions, less than \$50,000, indicate amount. D. Did you sell goods valued in excess amount. \$ E. If you answered no to 9D, did you se purchased other goods valued in excess. F. Did you purchase and receive good amount. \$ G. Did you purchase and receive good outside your State? If less than \$5 H. Gross Revenues from all sales or purchase and sales or pur | rovide services valued in excess of \$50 rectly outside your State? If no, indicated you provide services valued in excess broadcasting stations, commercial build \$ of \$50,000 directly to customers located ell goods valued in excess of \$50,000 directly outside you have valued in excess of \$50,000 from directly outside you have valued in excess of \$50,000 from directly valued in excess of \$50,000 from enter 0,000, indicate amount. \$ overformance of services (Check the large) | of \$50,000 to public utilities, transit sylings, educational institutions, or retail doutside your State? If less than \$50,000 rectly to customers located inside your State? If less than \$50,000 rectly to customers located inside your state? If less than \$50,000, indicate extly outside your State? If less than \$50,000 rectly outside your State? If less than \$50,000, indicate extrapolations who received the goods directly extramount): | urchased goods u provided. ystems, concerns? If 100, indicate r State who e amount. 150,000, indicate | |
| \$ B. If you answered no to 9A, did you p valued in excess of \$50,000 from dir \$ C. If you answered no to 9A and 9B, did newspapers, health care institutions, less than \$50,000, indicate amount. D. Did you sell goods valued in excess amount. \$ E. If you answered no to 9D, did you se purchased other goods valued in excess. F. Did you purchase and receive good amount. \$ G. Did you purchase and receive good outside your State? If less than \$5 H. Gross Revenues from all sales or purchase and sales or pur | rovide services valued in excess of \$50 rectly outside your State? If no, indicated your provide services valued in excess broadcasting stations, commercial build \$ of \$50,000 directly to customers located lell goods valued in excess of \$50,000 directly outside you like valued in excess of \$50,000 from directly outside you like valued in excess of \$50,000 from enter 0,000, indicate amount. \$ oerformance of services (Check the large 00,000 [] \$1,000,000 or more If less the last 12 months? If yes, specify da | of \$50,000 to public utilities, transit sylings, educational institutions, or retail doutside your State? If less than \$50,0 rectly to customers located inside your state? If less than \$50,000, indicate extly outside your State? If less than \$50,000, indicate extly outside your State? If less than \$50,000, indicate extly outside your State? If less than \$60,000, indicate extly outside your State? If less than \$60,000, indicate amount): | urchased goods u provided. ystems, concerns? If 00, indicate r State who e amount. 550,000, indicate ly from points | |
| \$ B. If you answered no to 9A, did you p valued in excess of \$50,000 from dir \$ C. If you answered no to 9A and 9B, did newspapers, health care institutions, less than \$50,000, indicate amount. D. Did you sell goods valued in excess amount. \$ E. If you answered no to 9D, did you set purchased other goods valued in excess. F. Did you purchase and receive good amount. \$ G. Did you purchase and receive good outside your State? If less than \$5 t | rovide services valued in excess of \$50 rectly outside your State? If no, indicated your provide services valued in excess broadcasting stations, commercial build \$ of \$50,000 directly to customers located ell goods valued in excess of \$50,000 directly outside you have valued in excess of \$50,000 from directly outside you have valued in excess of \$50,000 from directly valued in excess of \$50,000 from enter the valued in excess of \$50,000 from enter th | of \$50,000 to public utilities, transit sylings, educational institutions, or retail doutside your State? If less than \$50,0 rectly to customers located inside your state? If less than \$50,000, indicate extly outside your State? If less than \$50,000, indicate extly outside your State? If less than \$50,000, indicate extly outside your State? If less than \$60,000, indicate extly outside your State? If less than \$60,000, indicate amount): | urchased goods u provided. ystems, concerns? If 00, indicate r State who e amount. 550,000, indicate ly from points | |
| B. If you answered no to 9A, did you p valued in excess of \$50,000 from dir \$ C. If you answered no to 9A and 9B, did newspapers, health care institutions, less than \$50,000, indicate amount. D. Did you sell goods valued in excess amount. \$ E. If you answered no to 9D, did you sell purchased other goods valued in excess amount. \$ F. Did you purchase and receive good amount. \$ G. Did you purchase and receive good outside your State? If less than \$50. H. Gross Revenues from all sales or present the service of the service good outside your State? If less than \$50. J. Did you begin operations within the service good of the service good outside your State? If less than \$50. J. Did you begin operations within the service good of the service good outside your State? If less than \$50. | rovide services valued in excess of \$50 rectly outside your State? If no, indicated your provide services valued in excess broadcasting stations, commercial build \$ of \$50,000 directly to customers located ell goods valued in excess of \$50,000 directly outside you like valued in excess of \$50,000 from directly outside you like valued in excess of \$50,000 from enteronance of services (Check the large 100,000 [] \$1,000,000 or more If less the last 12 months? If yes, specify da location or group). | of \$50,000 to public utilities, transit sylings, educational institutions, or retail doutside your State? If less than \$50,000 rectly to customers located inside your state? If less than \$50,000 rectly outside your State? If less than \$50,000, indicate extly outside your State? If less than \$50,000, indicate extra amount): han \$100,000, indicate amount. te: OUP THAT ENGAGES IN COLLECTION | urchased goods u provided. ystems, concerns? If 00, indicate r State who e amount. 550,000, indicate ly from points | |
| B. If you answered no to 9A, did you p valued in excess of \$50,000 from dir \$ C. If you answered no to 9A and 9B, did newspapers, health care institutions, less than \$50,000, indicate amount. D. Did you sell goods valued in excess amount. \$ E. If you answered no to 9D, did you sell purchased other goods valued in excess amount. \$ F. Did you purchase and receive good amount. \$ G. Did you purchase and receive good outside your State? If less than \$5 H. Gross Revenues from all sales or provided the provided in the pro | rovide services valued in excess of \$50 rectly outside your State? If no, indicated your provide services valued in excess broadcasting stations, commercial build \$00 of \$50,000 directly to customers located ell goods valued in excess of \$50,000 directly outside you like valued in excess of \$50,000 from directly outside you like valued in excess of \$50,000 from directly outside you like valued in excess of \$50,000 from enter 0,000, indicate amount. \$00,000 [] \$1,000,000 or more If less the last 12 months? If yes, specify day the last 12 months? If yes, specify day occurrence of association or group). | of \$50,000 to public utilities, transit sylings, educational institutions, or retail doutside your State? If less than \$50,000 rectly to customers located inside your state? If less than \$50,000 rectly outside your State? If less than \$50,000, indicate extly outside your State? If less than \$50,000, indicate extra amount): han \$100,000, indicate amount. te: OUP THAT ENGAGES IN COLLECTION | urchased goods u provided. ystems, concerns? If 00, indicate r State who e amount. 550,000, indicate ly from points | |
| B. If you answered no to 9A, did you p valued in excess of \$50,000 from dir \$ C. If you answered no to 9A and 9B, did newspapers, health care institutions, less than \$50,000, indicate amount. D. Did you sell goods valued in excess amount. \$ E. If you answered no to 9D, did you see purchased other goods valued in excess \$ F. Did you purchase and receive good amount. \$ G. Did you purchase and receive good outside your State? If less than \$5 H. Gross Revenues from all sales or present the second process of the second pr | rovide services valued in excess of \$50 rectly outside your State? If no, indicated your provide services valued in excess broadcasting stations, commercial build \$00 of \$50,000 directly to customers located ell goods valued in excess of \$50,000 directly outside you like valued in excess of \$50,000 from directly outside you like valued in excess of \$50,000 from directly outside you like valued in excess of \$50,000 from enter 0,000, indicate amount. \$00,000 [] \$1,000,000 or more If less the last 12 months? If yes, specify day the last 12 months? If yes, specify day occurrence of association or group). | of \$50,000 to public utilities, transit sylings, educational institutions, or retail doutside your State? If less than \$50,000 rectly to customers located inside your state? If less than \$50,000 rectly to customers located inside your state? If less than \$50,000, indicate rectly outside your State? If less than \$erprises who received the goods directly rest amount): han \$100,000, indicate amount. te: OUP THAT ENGAGES IN COLLECTIONS | urchased goods u provided. ystems, concerns? If 00, indicate r State who e amount. 650,000, indicate ly from points EVE BARGAINING? | |
| \$ B. If you answered no to 9A, did you p valued in excess of \$50,000 from dir \$ C. If you answered no to 9A and 9B, did newspapers, health care institutions, less than \$50,000, indicate amount. D. Did you sell goods valued in excess amount. \$ E. If you answered no to 9D, did you sell goods valued in excess amount. \$ F. Did you purchase and receive good amount. \$ G. Did you purchase and receive good outside your State? If less than \$5 H. Gross Revenues from all sales or present the selection of | rovide services valued in excess of \$50 rectly outside your State? If no, indicated your provide services valued in excess broadcasting stations, commercial build \$ of \$50,000 directly to customers located ell goods valued in excess of \$50,000 directly outside you have valued in excess of \$50,000 from directly outside you have valued in excess of \$50,000 from enteronance of services (Check the large 200,000 [] \$1,000,000 or more If less the last 12 months? If yes, specify day the last 12 months? If yes, specify day address of association or group). ED TO GIVE FURTHER INFORMATIO | of \$50,000 to public utilities, transit sylings, educational institutions, or retail doutside your State? If less than \$50,000 rectly to customers located inside your state? If less than \$50,000 rectly to customers located inside your state? If less than \$50,000, indicate retly outside your State? If less than \$50,000, indicate retly outside your State? If less than \$50,000, indicate rest amount): han \$100,000, indicate amount. te: OUP THAT ENGAGES IN COLLECTIONS E-MAIL ADDRESS | urchased goods u provided. ystems, concerns? If 00, indicate r State who e amount. 550,000, indicate ly from points TEL. NUMBER | |
| \$ B. If you answered no to 9A, did you p valued in excess of \$50,000 from dir \$ C. If you answered no to 9A and 9B, did newspapers, health care institutions, less than \$50,000, indicate amount. D. Did you sell goods valued in excess amount. \$ E. If you answered no to 9D, did you sell goods valued in excess amount. \$ F. Did you purchase and receive good amount. \$ G. Did you purchase and receive good outside your State? If less than \$5 H. Gross Revenues from all sales or present the selection of | rovide services valued in excess of \$50 rectly outside your State? If no, indicated your provide services valued in excess broadcasting stations, commercial build \$00 of \$50,000 directly to customers located ell goods valued in excess of \$50,000 directly outside you like valued in excess of \$50,000 from directly outside you like valued in excess of \$50,000 from directly outside you like valued in excess of \$50,000 from enter 0,000, indicate amount. \$00,000 [] \$1,000,000 or more If less the last 12 months? If yes, specify day the last 12 months? If yes, specify day occurrence of association or group). | of \$50,000 to public utilities, transit sylings, educational institutions, or retail doutside your State? If less than \$50,000 rectly to customers located inside your state? If less than \$50,000 rectly to customers located inside your state? If less than \$50,000, indicate retly outside your State? If less than \$50,000, indicate retly outside your State? If less than \$50,000, indicate rest amount): han \$100,000, indicate amount. te: OUP THAT ENGAGES IN COLLECTIONS E-MAIL ADDRESS | urchased goods u provided. ystems, concerns? If 00, indicate r State who e amount. 550,000, indicate ly from points TEL. NUMBER | |
| \$ B. If you answered no to 9A, did you p valued in excess of \$50,000 from dir \$ C. If you answered no to 9A and 9B, did newspapers, health care institutions, less than \$50,000, indicate amount. D. Did you sell goods valued in excess amount. \$ E. If you answered no to 9D, did you sell purchased other goods valued in excess amount. \$ F. Did you purchase and receive good amount. \$ G. Did you purchase and receive good outside your State? If less than \$5. H. Gross Revenues from all sales or provided the selection of the selection o | rovide services valued in excess of \$50 rectly outside your State? If no, indicated your provide services valued in excess broadcasting stations, commercial build \$ of \$50,000 directly to customers located ell goods valued in excess of \$50,000 directly outside you have valued in excess of \$50,000 from directly outside you have valued in excess of \$50,000 from enteronance of services (Check the large 100,000 [] \$1,000,000 or more If less the last 12 months? If yes, specify day the last 12 months? If yes, specify day contain or group). ED TO GIVE FURTHER INFORMATION OR OTHER EMPLOYER GREATED REPRESENTATIVE CO | of \$50,000 to public utilities, transit sylings, educational institutions, or retail doutside your State? If less than \$50,000 rectly to customers located inside your state? If less than \$50,000 rectly to customers located inside your state? If less than \$50,000, indicate retly outside your State? If less than \$50,000, indicate retly outside your State? If less than \$50,000, indicate retly outside your State? If less than \$60,000, indicate amount. The state of the your State? If less than \$60,000, indicate amount. The state of the your State? If less than \$60,000, indicate amount. The state of the your State? If less than \$60,000, indicate amount. The state of the your State? If less than \$60,000, indicate amount. The state of the your State? If less than \$60,000, indicate amount. | urchased goods u provided. ystems, concerns? If 00, indicate r State who e amount. 650,000, indicate ly from points TEL. NUMBER NAIRE | |

PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and/or unfair labor practice proceedings and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary. However, failure to supply the information may cause the NLRB to refuse to process any further a representation or unfair labor practice case, or may cause the NLRB to issue you a subpoena and seek enforcement of the subpoena in federal court.



UNITED STATES GOVERNMENT NATIONAL LABOR RELATIONS BOARD



Agency Website: www.nlrb.gov Telephone: (510)637-3300 Fax: (510)637-3315 Download NLRB Mobile App

September 22, 2020

United Farms Workers of America 29700 Woodford-Tehachapi Rd PO Box 62 Keene CA 93531

REGION 32

1301 Clay St Ste 300N

Oakland, CA 94612-5224

Re: Foster Poultry Farms Case 32-CA-266430

Dear Sir or Madam:

The charge that you filed in this case on September 18, 2020 has been docketed as case number 32-CA-266430. This letter tells you how to contact the Board agent who will be investigating the charge, explains your right to be represented, discusses presenting your evidence, and provides a brief explanation of our procedures, including how to submit documents to the NLRB.

<u>Investigator</u>: This charge is being investigated by Field Examiner STEPHEN M. SLOPER whose telephone number is (510)671-3045. If this Board agent is not available, you may contact Acting Assistant to the Regional Director HOKULANI VALENCIA whose telephone number is (510)671-3047.

Right to Representation: You have the right to be represented by an attorney or other representative in any proceeding before us. If you choose to be represented, your representative must notify us in writing of this fact as soon as possible by completing *Form NLRB-4701*, *Notice of Appearance*. This form is available on our website, www.nlrb.gov, or from an NLRB office upon your request.

If you are contacted by someone about representing you in this case, please be assured that no organization or person seeking your business has any "inside knowledge" or favored relationship with the National Labor Relations Board. Their knowledge regarding this proceeding was only obtained through access to information that must be made available to any member of the public under the Freedom of Information Act.

Presentation of Your Evidence: As the party who filed the charge in this case, it is your responsibility to meet with the Board agent to provide a sworn affidavit, or provide other witnesses to provide sworn affidavits, and to provide relevant documents within your possession. Because we seek to resolve labor disputes promptly, you should be ready to promptly present your affidavit(s) and other evidence. If you have not yet scheduled a date and time for the Board agent to take your affidavit, please contact the Board agent to schedule the affidavit(s). If you fail to cooperate in promptly presenting your evidence, your charge may be dismissed without investigation.

<u>Preservation of all Potential Evidence:</u> Please be mindful of your obligation to preserve all relevant documents and electronically stored information (ESI) in this case, and to take all steps necessary to avoid the inadvertent loss of information in your possession, custody or control. Relevant information includes, but is not

limited to, paper documents and all ESI (e.g. SMS text messages, electronic documents, emails, and any data created by proprietary software tools) related to the above-captioned case.

<u>Prohibition on Recording Affidavit Interviews:</u> It is the policy of the General Counsel to prohibit affiants from recording the interview conducted by Board agents when subscribing Agency affidavits. Such recordings may impede the Agency's ability to safeguard the confidentiality of the affidavit itself, protect the privacy of the affiant and potentially compromise the integrity of the Region's investigation.

<u>Correspondence</u>: All documents submitted to the Region regarding your case MUST be filed through the Agency's website, <u>www.nlrb.gov</u>. This includes all formal pleadings, briefs, as well as affidavits, documentary evidence, and position statements. The Agency requests all evidence submitted electronically to be in the form it is normally used and maintained in the course of business (i.e., native format). Where evidence submitted electronically is not in native format, it should be submitted in a manner that retains the essential functionality of the native format (i.e., in a machine-readable and searchable electronic format).

If you have questions about the submission of evidence or expect to deliver a large quantity of electronic records, please promptly contact the Board agent investigating the charge. If you cannot e-file your documents, you must provide a statement explaining why you do not have access to the means for filing electronically or why filing electronically would impose an undue burden.

In addition, this Region will be issuing case-related correspondence and documents, including complaints, compliance specifications, dismissal letters, deferral letters, and withdrawal letters, electronically to the email address you provide. Please ensure that you receive important case-related correspondence, please ensure that the Board Agent assigned to your case has your preferred email address. These steps will ensure that you receive correspondence faster and at a significantly lower cost to the taxpayer. If there is some reason you are unable to receive correspondence via email, please contact the agent assigned to your case to discuss the circumstances that prevent you from using email.

Information about the Agency, the procedures we follow in unfair labor practice cases and our customer service standards is available on our website, www.nlrb.gov or from an NLRB office upon your request. NLRB Form 4541, Investigative Procedures offers information that is helpful to parties involved in an investigation of an unfair labor practice charge.

We can provide assistance for persons with limited English proficiency or disability. Please let us know if you or any of your witnesses would like such assistance.

Very truly yours,

VALERIE HARDY-MAHONEY

Regional Director

Enclosure: Copy of Charge

cc: Aida L. Sotelo, Legal Assistant

United Farm Workers of America

P.O. Box 1998

Bakersfield CA 93303

NATIONAL LABOR RELATIONS BOARD

NOTICE OF APPEARANCE

| FOSTER POULTRY FARMS | 1 |
|--|---|
| | |
| Charged Party | |
| _ | 22 CA 266420 |
| and UNITED FARM WORKERS OF AMERICA | CASE 32-CA-266430 |
| | |
| Charging Party | |
| | |
| | |
| | |
| X REGIONAL DIRECTOR EXECUTIVE SECRETARY NATIONAL LABOR RELATIONS BOARD Washington, DC 20570 | ☐ GENERAL COUNSEL NATIONAL LABOR RELATIONS BOARD Washington, DC 20570 |
| | |
| | |
| THE UNDERSIGNED HEREBY ENTERS APPEARANCE AS REPRESENTAT | IVE OF |
| Foster Poultry Farms | |
| IN THE ABOVE-CAPTIONED MATTER. | |
| | |
| CHECK THE APPROPRIATE BOX(ES) BELOW: | |
| REPRESENTATIVE IS AN ATTORNEY | |
| _ | |
| ☑ IF REPRESENTATIVE IS AN ATTORNEY, IN ORDER TO ENSURE TO CERTAIN DOCUMENTS OR CORRESPONDENCE FROM THE AGENCY IN BOX MUST BE CHECKED. IF THIS BOX IS NOT CHECKED, THE PARTY V DOCUMENTS SUCH AS CHARGES, PETITIONS AND FORMAL DOCUMEN CASEHANDLING MANUAL. | ADDITION TO THOSE DESCRIBED BELOW, THIS WILL RECEIVE ONLY COPIES OF CERTAIN |
| | |
| (REPRESENTATIVE INFORI | MATION) |
| Nick C. Geannacopulos and Jennifer L. Mora | |
| Seyfarth Shaw LLP, 560 Mission Street, Su | ite 3100, San Francisco, CA 94105 |
| E-MAIL ADDRESS: ngeannacopulos@seyfarth.com; jmora@seyf | arth.com |
| OFFICE TELEPHONE NUMBER: 415-397-2823 | |
| CELL PHONE NUMBER: | _{FAX:} 415-307-8549 |
| COLD THOUSEN | |
| signature: /s/ Nick C. Geannacopulos; /s/ Jennifer | L. Mora |
| (Please sign in ink.) DATE: September 22, 2020 | |
| | |

 $^{^{\}rm 1}$ if case is pending in Washington and notice of appearance is sent to the general counsel or the executive secretary, a copy should be sent to the regional director of the region in which the case was filed so that those records will reflect the appearance.

NATIONAL LABOR RELATIONS BOARD

NOTICE OF APPEARANCE

| Foster Poultry Farms | |
|--|---|
| | |
| | CASE 32-CA-266430 |
| and | CASE 32-0A-200430 |
| United Farm Workers of America | |
| | |
| REGIONAL DIRECTOR EXECUTIVE SECRETARY NATIONAL LABOR RELATIONS BOARD Washington, DC 20570 | GENERAL COUNSEL NATIONAL LABOR RELATIONS BOARD Washington, DC 20570 |
| THE UNDERSIGNED HEREBY ENTERS APPEARANCE AS REPRESENTATION. United Farm Workers of America | IVE OF |
| | |
| IN THE ABOVE-CAPTIONED MATTER. | |
| CHECK THE APPROPRIATE BOX(ES) BELOW: REPRESENTATIVE IS AN ATTORNEY IF REPRESENTATIVE IS AN ATTORNEY, IN ORDER TO ENSURE TO CERTAIN DOCUMENTS OR CORRESPONDENCE FROM THE AGENCY IN BOX MUST BE CHECKED. IF THIS BOX IS NOT CHECKED, THE PARTY WE DOCUMENTS SUCH AS CHARGES, PETITIONS AND FORMAL DOCUMENTS CASEHANDLING MANUAL. | ADDITION TO THOSE DESCRIBED BELOW, THIS VILL RECEIVE ONLY COPIES OF CERTAIN |
| (REPRESENTATIVE INFORM | AATION) |
| Mario Martinez | |
| MAILING ADDRESS: P.O. Box 1998, Bakersfield, CA 93303 | |
| E-MAIL ADDRESS: info@farmworkerlaw.com | |
| OFFICE TELEPHONE NUMBER: 661-859-1174 | |
| CELL PHONE NUMBER: | FAX: |
| SIGNATURE; MMD WALK | |
| DATE: (Please sign in ink.) 9-25-2020 | |

¹ IF CASE IS PENDING IN WASHINGTON AND NOTICE OF APPEARANCE IS SENT TO THE GENERAL COUNSEL OR THE EXECUTIVE SECRETARY, A COPY SHOULD BE SENT TO THE REGIONAL DIRECTOR OF THE REGION IN WHICH THE CASE WAS FILED SO THAT THOSE RECORDS WILL REFLECT THE APPEARANCE.